Solano Community College - Absence/Overtime Report for the Month ending _____ 10th, 20 ____

Name _____

Employee ID # _____

Date	Absence Code	Absence Hours	Pre-approved Overtime or Comp Time Code	Pre-approved Overtime or Comp Time Hours
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
21				
22				
23				
24				
25				
26				
27				
28				
29				
30				
31				
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
Total:			Total:	

For Special Projects, please indicate Budget Code(s):

Summarize & Total

Employee enters total per code

Absence Code	Absence Hours	Pre-approved Overtime or Comp Time Code	Pre-approved Overtime or Comp Time Hours
Total:		Total:	

CODES:

Leaves taken:

Vacation	VUS
Sick Leave	SUS
Personal Necessity	PNU
Floating Holiday	FHU
Emergency Leave	EUS
Comp Time **Taken**	CTU
Breavement	BRV
Jury Duty	JUR
Workers' Comp	WC
Parental Leave	PL
Unpaid Leave	U

Overtime or Comp Time:

Overtime	OT
Comp Time **Earned**	CT

I certify that the above hours correctly report absences taken and overtime earned

Employee Signature _____ Date

Manager Signature _____ Date

Special note: Work week is Monday through Sunday. Overtime/comp time is earned per work week after 8 hours per day (unless on alternate schedule of over 8 hours per day) or after 40 hours **worked** (not paid).
Example: You are paid for a holiday on a Monday. You work the following Saturday. Hours worked on Saturday - up to 8 hours - are paid as straight time.