

## **Support Staff Bi-Weekly Time Sheet**

Org Code:	ast Nam	ame:				rst Name	2:		Banner I.	Pay Period Start/End Date:					Employee' Signature:				
Department:		Position Number Ra			Rate O	ate Of Pay: En			Employee Class:			Distribution: □Dept □ Employee □ Payroll				Approved By:			
					WEEK 1								WE	EK 2					
LEAVES (See Page 2 for Leave Types)		S	М	Т	w	тн	F	s	Week 1 Total	s	M	Т	w	тн	F	s	Week 2 Total	CODE	GRAND TOTAL
EARNINGS																			
Regular Hours																		BAS	
Shift Premium - Afternoon																		SHA	
Shift Premium - Night																		SHE	
Authorized Substitution Pay																		SUB	
Other																			
OVERTIME FOR PAY																			
1/2x Short Change Over																		SC1	
1x Short Change Over																		SC2	
1 1/2x Reg Hrly Rate																		OT1	
2x Hrly Rate																		OT2	
Other																			
BANKED OVERTIME																			
Short Change Over for time off 1/2x (actual)																		SC3	
Short Change Over for time off 1x (actual)																		SC4	
Overtime for time off 1 1/2x (actual)																		OT4	
Overtime for time off 2x (actual)																		OT5	
Other																			

Org Code: Record the organization code that the hours recorded on this time sheet are to

be charged to. If you do not know check with your supervisor.

Last Name/First Name: Fill in your name as you have asked it to be used throughout Kwantlen. If your

name has changed, please advise Human Resources.

Banner I.D. Record your employee number, this is also your student number if taking courses

at Kwantlen.

Pay Period Start/End

Date:

These dates are available through a drop down menu if using the electronic version of

the time sheet or they can be obtained from the pay schedule, which is available in

payroll. Record the Start and End Dates of the Pay Period.

Employee's Signature: Please sign your name.

Department: Fill in your department name.

Position Number Every Job you have in the College has a position number. Record the Position Number

that the hours you are working are to be charged against. You may have more than one Position Number, please complete a separate timesheet for each Position

Number. If you do not know check with your supervisor.

Employee Class: This is a drop down menu if using the electronic version otherwise you should

record one of the following: Staff Regular, Staff Repeating Term, Staff Posted Auxiliary > 6mos, Staff Posted Auxiliary < 6mos, Staff Auxiliary, Student Assistant,

Model, or Conversationalist.

Distribution: If using electronic version, click on the box that you are printing a copy for. If using

the pre-printed form distribute as per colour coding.

Rate of Pay: Record your hourly rate.

Approved By: Signature of person who has authority to sign for this org. Code.

## Please use the following Leave Codes

LEAVES	CODES	LEAVES	CODES
Vacation	VAC	Worker's Compensation	WCB
Sick	SIC	Union Business With Pay	UNB
Banked Time Off in Lieu of O.T. Pay	OTA	Bereavement - Immediate Family	BRI
Family Illness	FAM	Bereavement - Non Immediate Family	BRN
Medical Dental Appointments	MED	General PD (P.D. That doesn't fit under any specific article in the Collective Agreement)	PD1
Leave Without Pay	DOC	Staff Training and Development (Article 22.2)	PD2
Birth/Adoption	SP1	Professional Development – Specialized Positions (Article 23.2)	PD3
Household/Domestic Emergency	SP2	University Wide PD Activities (Article 22.3)	PD4
Attend a Funeral	SP3	University Orientation (Article 22.4)	PD5
Citizenship Hearing	SP4	Employer Required Training (Article 23.3)	PD6
Moving	SP5	Court Leave	CRT