



## Semi-Monthly Timesheet

Beginning Date: September 16th, 2022

Ending Date: September 30th, 2022

Day	Date	Time In	Time Out	Lunch	Time In	Time Out	Hours Worked
Week 1							
Mon							
Tues							
Wed							
Thurs							
Fri	09/16/22						
Sat	09/17/22						
Sun	09/18/22						
					Regular	Overtime	
					Week 1 Total		

Employee Name: \_\_\_\_\_

WKU ID: \_\_\_\_\_

Department/Unit: \_\_\_\_\_

**Instructions:** The Fair Labor Standards Act and the Commonwealth of Kentucky labor laws require that a record of hours worked on a weekly basis be maintained for all non-exempt employees. While semi-monthly employees are paid on the 15th and at the end of each month, time worked must be documented on a weekly basis. The official workweek begins at 12:01 a.m. on Monday and ends at 12:00 midnight on Sunday (reference HR policy 4.400, Hours Worked and Overtime Compensation for additional guidance). Time should be rounded to the nearest quarter hour.

For days not actually worked, enter the appropriate code as follows: *V*=Vacation Leave, *S*=Medical/Sick Leave; *W*=Leave without pay; *H*=Holiday

Important: This form is not used for official reporting of vacation and medical/sick leave. All paid time off should be reported in TopNet.

**Overtime Payment** – Any overtime due in a given week must be paid in the employee's next paycheck (15th or end of month) available. In order to make an overtime payment or to pay for time between 37.5 and 40 hours, a Form 16 must be prepared and forwarded to the Payroll Office.

**Compensatory Time** - Compensatory time is not allowed by either state law or University policy. All hours worked must be paid at either the regular or overtime rate as applicable.

Pay Week Totals			
	Reg Hours up to 37.5	Hours >37.5 up to 40**	Hours over 40**
Sep 12-18			
Sep 19-25			
Sep 26-30			

\*\*Report all hours above 37.5 on Form 16

I certify that this record is accurate and accounts for my time during the indicated period.

Employee Signature: \_\_\_\_\_

I certify that the hours recorded and coded on this form are correct to the best of my knowledge and are in accordance with University policy.

Supervisor Signature: \_\_\_\_\_

*Department/Unit Heads are responsible for maintaining this record in **departmental files** on each covered employee for a period of **three (3) years**. These records may be checked for compliance at anytime by the Department of Human Resources or by the Internal Auditor.*

Day	Date	Time In	Time Out	Lunch	Time In	Time Out	Hours Worked
Week 2							
Mon	09/19/22						
Tues	09/20/22						
Wed	09/21/22						
Thurs	09/22/22						
Fri	09/23/22						
Sat	09/24/22						
Sun	09/25/22						
					Regular	Overtime	
					Week 2 Total		

Day	Date	Time In	Time Out	Lunch	Time In	Time Out	Hours Worked
Week 3							
Mon	09/26/22						
Tues	09/27/22						
Wed	09/28/22						
Thurs	09/29/22						
Fri	09/30/22						
					Regular	Overtime	
					Week 3 Total		