

Guidelines for Completion of Time Sheets for Exempt Staff Members

Exempt staff members should record and report exception time. If their department does not already have a process that meets Lehigh University reporting requirements, Human Resources has provided time sheets for exempt staff. Time sheets with pre-printed dates are available on the web at <https://hr.lehigh.edu/hr-forms> under the Staff Compensation Forms section.

Time sheets should be completed during the pay period. They should not be signed in advance. Time sheets should be signed and submitted at the conclusion of the pay period.

Completion of time sheet by Exempt Staff Member:

- (1) Employee Name – Fill in your name.
- (2) Department – Fill in your department name.
- (3) Under each day, complete hours by time category. Record actual time not worked as accurately as possible.
 - (a) Floating Holiday, Vacation, Sick Leave/Excused Absence, Bereavement, Jury Duty, and/or Absence – Enter any time not worked using the individual time category as defined in the [Staff Guide](#), under *Time Away From Work*.
 - (b) Other – Enter any time that does not fit with the itemized time categories.
 - (c) Comments – Enter any information related to exception time.

Employee signs and dates form, makes a copy, and forwards to departmental coordinator the day after the pay period ends.

Retention of Records: All time sheets are to be maintained in the department for no less than three (3) years. After three years, the time sheets can be disposed of by either shredding or destroying.

Lehigh University Exempt Staff Exception Time Report

EXAMPLE

Employee Name: **(1)** Department: **(2)**

Pay Period: **Month 20YY**

Day/Date	Vac 510	FH 500	Sick/Exc 520	Bereav 550	Jury Duty 560	Other	Comments
1	(a)	(a)	(a)	(a)	(a)	(b)	(c)
2							
3							
4							Saturday
5							Sunday
6							
7							
8							
9							
10							
11							Saturday
12							Sunday
13							
14							
15							
16							
17							
18							Saturday
19							Sunday
20							
21							
22							
23							
24							
25							Saturday
26							Sunday
27							
28							
29							
30							

To be completed by Employee	
<i>I hereby certify all time reported above is accurate and correct.</i>	
Employee Signature:	Date:
Comments:	