

**KEWEENAW BAY OJIBWA COMMUNITY COLLEGE
TIME AND ATTENDANCE REPORT**

NAME: _____

PAY PERIOD: from _____ to _____

ACCOUNT CODE	% Time and Effort	Hours Worked														Total Hours
		M	T	W	TH	F	SA	SU	M	T	W	TH	F	SA	SU	
1.																
COMP TIME EARNED																
2.																
COMP TIME EARNED																
3.																
COMP TIME EARNED																

HOURS WORKED:	
ANNUAL LEAVE:	
SICK LEAVE	
OTHER LEAVE:	
COMP TIME TAKEN:	
TOTAL HOURS:	

- A - Annual Leave
- S - Sick Leave
- H - Holiday
- C - Comp Time Used
- P - Personal Leave
- E - Educational Leave
- F - Funeral/Bereavement Leave
- O - Other (weather closures, etc.)

<u>COMP TIME REVIEW</u>	
Comp Time Balance	
Comp Time Used	-
Comp Time Earned	+
Comp Time Available	

I certify that the reported information is correct:

Employee Date

Supervisor Date