

PART - TIME EMPLOYEE (018)

BOSSIER PARISH COMMUNITY COLLEGE						1/1/1999
ATTENDANCE AND LEAVE RECORD						
NAME OF EMPLOYEE		DEPARTMENT	DIVISION OR UNIT		DUTY STATION	
PA Y PERIOD:		REGULAR WORK WEEK	ACCRUAL RATE	FORWARD FROM	ANNUAL	SICK COMPENSATORY
FROM:	TO:	HOURS	HOURS	PREVIOUS YEARS		
TIME WORKED (HOURS)			TIME ABSENT (HOURS)			
Date	HOURS	TIME IN	TIME OUT	Description of Duties		
SUNDAY						
MONDAY						
TUESDAY						
WEDNESDAY						
THURSDAY						
FRIDAY						
SATURDAY						
SUNDAY						
MONDAY						
TUESDAY						
WEDNESDAY						
THURSDAY						
FRIDAY						
SATURDAY						
TOTAL						
BALANCE AT CLOSE OF PERIOD		:				
EARNED DURING PERIOD		:				
BALANCE TO BE BROUGHT FORWARD		:				
*OTHER:						
J - CIVIL, EVERGENCY, AND SPECIAL LV.			CERTIFIED CORRECT:			
M - MILITARY LEAVE .			EMPLOYEE:			
T - EDUCATIONAL LEAVE						
				SUPERVISOR:		
<i>I certify that I have worked my normal employment schedule of at least 20 hours per week except as reflected by use of leave on the dates specified above.</i>						

**PART-TIME WORKER (018)
POSITIVE TIME REPORTING - PTR**

				<i>Bossier Parish Community College</i>		8/1/2000
ATTENDANCE RECORD						
NAME OF EMPLOYEE		DEPARTMENT				
PAYPERIOD						
FROM:	TO:					
TIME WORKED (HOURS)						
	HOURS	TIME IN	TIME OUT	Description of Duties		
SUNDAY						
MONDAY						
TUESDAY						
WEDNESDAY						
THURSDAY						
FRIDAY						
SATURDAY						
SUNDAY						
MONDAY						
TUESDAY						
WEDNESDAY						
THURSDAY						
FRIDAY						
SATURDAY						
TOTAL						
I CERTIFY THAT I HAVE WORKED THE HOURS SPECIFIED ON THE DATES ABOVE:						
			CERTIFIED CORRECT:			
			EMPLOYEE:			
			SUPERVISOR:			

PART - TIME PERMANENT EMPLOYEE (030)

BOSSIER PARISH COMMUNITY COLLEGE				1/1/1999			
ATTENDANCE AND LEAVE RECORD							
NAME OF EMPLOYEE		DEPARTMENT	DIVISION OR UNIT		DUTY STATION		
PA Y PERIOD:		REGULAR WORK WEEK	ACCRUAL RATE	FORWARD FROM	ANNUAL	SICK	COMPENSATORY
FROM:	TO:	HOURS	HOURS	PREVIOUS YEARS			
TIME WORKED (HOURS)				TIME ABSENT (HOURS)			
MONTH:	REGULAR	ANNUAL	SICK	COMP	LWOP	OTHER*	INITIALS
SUNDAY							
MONDAY							
TUESDAY							
WEDNESDAY							
THURSDAY							
FRIDAY							
SATURDAY							
SUNDAY							
MONDAY							
TUESDAY							
WEDNESDAY							
THURSDAY							
FRIDAY							
SATURDAY							
TOTAL							
BALANCE AT CLOSE OF PERIOD		:					
EARNED DURING PERIOD		:					
BALANCE TO BE BROUGHT FORWARD		:					
*OTHER:							
J - CIVIL, EVERGENCY, AND SPECIAL LV.				CERTIFIED CORRECT:			
M - MILITARY LEAVE .				EMPLOYEE:			
T - EDUCATIONAL LEAVE				SUPERVISOR:			
<i>I certify that I have worked my normal employment schedule of at least 40 hours per week except as reflected by use of leave on the dates specified above.</i>							