Bi-Weekly Attendance Record – IU Northwest

Name _____ Department _____ Account No. _____

Pay Period: From _____ To _____

Week One

	Sun	Mon	Tues	Wed	Thur	Fri	Sat
Date							
Arrival Time							
Departure							
Meal Period: From							
To							
Class Hours: From							
To							

Record time in quarter-hour increments

	Sun	Mon	Tues	Wed	Thur	Fri	Sat	**Total Week 1**
Regular								
Vacation								
Sick								
Holiday								
Absent								
Overtime								
Other								
FMLA								
							Week 1 Total Hours	

Overtime hours worked reported for pay ☐

Overtime hours worked reported for comp time ☐

Week Two

	Sun	Mon	Tues	Wed	Thur	Fri	Sat
Date							
Arrival Time							
Departure							
Meal Period: From							
To							
Class Hours: From							
To							

	Sun	Mon	Tues	Wed	Thur	Fri	Sat	**Total Week 2**
Regular								
Vacation								
Sick								
Holiday								
Absent								
Overtime								
Other								
FMLA								
							Week 2 Total Hours	

Overtime hours worked reported for pay ☐

Overtime hours worked reported for comp time ☐

Employee Signature _____ Date _____ Supervisor Signature _____ Date _____