

EMPLOYEE'S WEEKLY TIMESHEET



Form Data

Deadline: Once all required signatures have been obtained, completed form can be faxed to 561-3456 at least one business day prior to payroll processing.

Employee Information

Prefix	First Name (Legal)	Middle I	Last Name (Legal)	Suffix	MaineStreet ID	Job Record
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Time Report

Day	Date	ACTUAL HOURS WORKED		TIME ABSENT					Total
		Regular Schedule	Additional Authorized Time	Vacation	Sick	Comp Time	Holiday	*Other	
SUN									
MON									
TUE									
WED									
THU									
FRI									
SAT									
TOTALS									

Signatures

Employee		Date	Print/type Name
Department Head/Supervisor		Date	Print/type Name

***Explanation Required**

General Instructions

1. **Form Name: Employee's Weekly TimeSheet**

2. **Revisions:** 07/2017

3. **Purpose:** use this form to report hours worked if employee is unable to enter their time via MaineStreet Timesheet regardless of reason.

4. **Required Fields:** Enter all information that needs to be added/updated in MaineStreet. Form fields preceded by **|** are required fields; missing required information will be considered incomplete and returned to preparer.

5. **Deadlines** for completed forms to be received by Human Resources. Items received after the deadline may or may not be completed in time for a current pay cycle.

a. **Biweekly employees** – AS SOON AS POSSIBLE, but no later than 1 business day prior to payroll processing for the period reported.

6. **Submission Methods:** Send completed forms (including with all required signatures) to HR/Payroll as follows:

a. **Fax to 561-3456:** This fax number transmits the form directly to ImageNow where payroll will link to the employee and move to appropriate data entry queue. This submission method is the most secure for protecting personal information.

b. **Email to payroll@maine.edu:** Completed form is sent via email attachment. Per Administrative Practice Letter – Employee Protection of Data, Social Security Numbers are not advised to be shared via email. If fax is not available and form with SSN is sent via email, Payroll will print the form to ImageNow and then the email will be deleted to safeguard the employee's information.

c. **Campus Mail:** Send via campus/USPS mail to UMS Payroll, 65 Texas Avenue, Bangor ME 04401. When received, the form will be faxed to ImageNow for processing.

Employee Information

1. **Prefix, First Name, Middle I, Last Name and Suffix:** Enter employee's legal name

a. **Additional Names:** notify HR of a different preferred name (legal name will display in HR pages and preferred name will be shared with other UMS applications such as Blackboard, etc.)

2. **MaineStreet ID:** Enter employee's 7-digit MaineStreet ID

3. **Job Record:** Employees may have multiple jobs with UMS. If applicable, enter the appropriate job/employment record number.

Hours Worked

Actual Hours Worked

1. **Date:** enter the mm/dd/yy date that corresponds with the day of the week.

2. **Regular Schedule:**

3. **Additional Authorized Time:**

4. **Totals:** the end of each column of hours

Time Absent

1. **Vacation:** Defaults from Position; can be overridden if necessary.

Employee & Supervisor Approval

1. **Employee:** employee signature represents agreement with the hours reported

2. **Supervisor:** supervisor signature represents approval and authorization to pay the employee for the hours reported

General Instructions

For additional information, visit <http://support.hr.maine.edu/human-resources-support/human-resources/hrms-topics>

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