

## Classified Attendance Report - Instructions

The classified attendance report is due on the **3<sup>rd</sup> business day of each month**. The signed completed document must be emailed to District Services payroll at [DO-Payroll@sjeccd.edu](mailto:DO-Payroll@sjeccd.edu). This report shows the current month's days/hours typically scheduled to work and the previous months overtime and absences. This form will automatically total the hours at the bottom of each column.

1. The top portion must be completed with your Colleague EMPL ID number, your name (*Last, First*) and your position code. If you are unsure of any of these, please call Eileen in Human Resources at X 6758 to confirm.
2. **Current Month:** Enter the correct current month and year at the top of the section. The left side of the report lists the hours that you are scheduled to work for the current month.
  - a. Even if you are scheduled for vacation in the upcoming month, list those hours as worked hours.
  - b. If there is a holiday in the month and it falls on a day of the week on which you normally work, write down the number of hours for which you are paid on a normal workday. This establishes what you should be paid for the holiday.
  - c. If the holiday occurs on a day of the week on which you are not normally scheduled to work, providing that you are working either on the day immediately preceding or succeeding the holiday, write down the number of hours that you work on a normal workday.
3. **Previous Month:** Enter the correct previous month and year at the top of the section. The right side of the report lists the overtime worked as well as absences taken in the previous month. (**Refer to Collective Bargaining Agreement for approval and use of plans.**)
  - a. **Overtime Worked Per Day (CBA 6.8):** If you are scheduled to work 8 hours a day and you work additional hours, these hours are called overtime. Record overtime to this column.
  - b. **Extra Hrs. Worked Per Day:** If you are scheduled to work less than 8 hours a day and you work additional hours, the hours up to 8 hours per day are called extra time hours, and hours over 8 hours a day are called overtime hours. Record extra hours to this column.
  - c. **Compensatory Time (Worked) (CBA 6.8):** If you are approved to work extra hours for compensatory time instead of being paid for overtime or extra time, record the number of hours you worked in this column. Payroll will manually multiply that amount by 1.5 and add to your bank.
  - d. **Compensatory Time (Taken) (CBA 6.8):** To use your compensatory hours previously earned, record the hours in this column.
  - e. **Sick (CBA 13.2), Vacation (CBA 12.4), Personal Necessity (CBA 13.3), Bereavement (CBA 13.7), and Jury Duty Leave (CBA 13.8):** Choose the appropriate column and list the number of hours on the line of the appropriate date.
    - i. Personal Necessity and Bereavement Leave require an explanation in the "Other" column.
    - ii. Jury Duty requires proof of attendance to be sent to payroll along with your attendance report. Also remit payment for serving (not including the mileage) to SJECCD. You will be paid your regular salary during your service.
    - iii. Any type of leave not listed should be noted in the "Other" column.
  - f. **Diversity Day Holiday (1 full day):** You are allowed to take ONE full day floating holiday during the fiscal year. Enter "1" for the day you chose to use.
  - g. **Comp Time Cash Out:** If you have a compensatory time balance and wish to cash out hours, record the hours in the lower right-hand side above the signature lines.
4. **Signatures:** Sign the report and keep a copy for your records. It should then be forwarded to your supervisor for his/her signature. The completed and signed report should immediately be forwarded to District Services Payroll.

**The attendance report must be received by Payroll by the 3<sup>rd</sup> business day of each month. Failure to turn in this report may result in your not being paid for that month.**

# CLASSIFIED ATTENDANCE REPORT

**EMPL ID#** 1234567  
**NAME** Mouse, Mickey  
Last Name, First Name

Fill this form out completely, accurately, and submit approved copy to the Payroll Department (DO-Payroll@sjeccd.edu) by the 3rd Business Day of the month for payment at the end of the month.

**POSITION CODE** 8ABCD1234C  
Entries should be in Quarter Hour Units

CURRENT Month/Year	Sep 2024
DATES WORKED	REGULAR HRS WORKED PER DAY
1	
2	8.00
3	8.00
4	8.00
5	8.00
6	8.00
7	
8	
9	8.00
10	8.00
11	8.00
12	8.00
13	8.00
14	
15	
16	8.00
17	8.00
18	8.00
19	8.00
20	8.00
21	
22	
23	8.00
24	8.00
25	8.00
26	8.00
27	8.00
28	
29	
30	8.00
31	
<b>TOTAL HRS</b>	<b>168.00</b>

Month/Year August 2024		Record PREVIOUS month's overtime and absences.				Indicate the total hours used each day you are absent						OTHER HOURS, PERSONAL BUSINESS, UNPAID TIME, RELATIONSHIP, or ADDITIONAL COMMENTS <small>*please explain</small>
DATES	OVERTIME HRS WORKED PER DAY	EXTRA HRS WORKED PER DAY	COMPENSATORY TIME		SICK LEAVE	VACATION LEAVE	PERSONAL NECESSITY LEAVE*	BEREAVEMENT LEAVE*	JURY DUTY	DIVERSITY DAY HOLIDAY (1 full day)		
			Worked	Taken								
1												
2										1.00		Floating Holiday
3												
4												
5												
6				2.00								Meeting
7		4.00										Outreach Event
8												
9												
10												
11												
12							8.00					Vacation
13												
14						4.00						
15										8.00		
16												
17		3.00										Flyer work - Remote
18												
19								4.00				Water leak at home
20												
21												
22		1.50										Monthly Reports
23												
24												
25												
26										8.00		Grandfather
27										8.00		Grandfather
28										8.00		Grandfather
29										8.00		Grandfather
30										8.00		Grandfather
31												
<b>TOTAL HRS</b>	<b>8.50</b>	<b>0.00</b>	<b>2.00</b>	<b>0.00</b>	<b>4.00</b>	<b>8.00</b>	<b>4.00</b>	<b>40.00</b>	<b>8.00</b>	<b>1.00</b>	<b>COMP TIME CASH OUT</b>	<b>10.00</b>

\*Bereavement and Personal Necessity Immediate Family Member: 1) child or spouse of unit members child; 2) parent; 3) spouse; 4) domestic partner; 5) grandparent; 6) grandchild; 7) sibling or sibling in law; 8) any relative living in the immediate household of the unit member.

I certify the information supplied is correct  
 Make a copy of this form for your records

**Employee Signature** Mickey Mouse  
**Supervisor Signature** Walt Disney