Time Report

Name:										Pay Period:													Return By:									
E#:											Pay ID:			MN		S1 SM		M	(Check One)													
Timekeeping Location:											Title:																					
Department:											Position Number:																					
Annual, Sick and Hours Worked Only (Code N											NOT Required)																					
Code	1	2	3	4	5	6	7	8	9	10				14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Total
Annl																																
Sick																																
HW																																
Othe Code	Ho	urs (Code	Rec	quire 5	ed)	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Total
CD		_								10						10		10														rotar
HR																																
	Time Report Codes - MN and S1 A – Annual											Conversion Of Minutes To Tenths																				
AM – Annual leave (Medical Residents Only) for Calcula											Iculating Hours Worked Route for S									r Sig	gnatures in Dynamic Forms											
B – Banked overtime .1 Hours C – Compensatory time taken .2 Hours																					Sid	signature of Employee										
c compensatory time taken												13 – 18 Minutes									316	Silati	11 C O	I LIII	pioye							
D – Early Dismissal .4 Hours 19 – 24 Mi												24 Mir	nutes								natives in Divinancia Fauna											
F – Bereavement leave (Funeral leave) .5 Hours 25 – 30 N														·							natures in Dynamic Forms											
H – Holiday (No data entry required) .6 Hours 31 – 36 Min														Signature of Supervisor																		
IB – Worked inclement weather banked .7 Hours 37 – 42 IP – Worked inclement weather paid .8 Hours 43 – 48															5									·								
IP – Worked inclement weather paid .8 Hours $43 - 48 \text{ M}$ J – Jury duty .9 Hours $49 - 54 \text{ M}$																Per Tennessee Code Annotated §8-50-801, compensatory or worked h																
K – Family medical leave 1.0 Hours																										-		-				-
L – Administrative Leave Time Report Codes - SM												hou	rs m	ust b	e tak	en p	rior	to an	nual	leave	e hou	ırs u	nless	the	annu	al lea	ave b	alance				
LM – Administrative leave (Medical Residents only) R – Student (RWSP)												is w	ithin	2 da	ys of	the	maxi	mun	acc	rual r	ate f	or th	ie en	nploy	ee.	All co	$mp\epsilon$	nsatory				
	M – Military leave											oorary		У		and	wor	ked ł	nolida	ay ba	alanc	es as	of A	pril 3	0 wi	ll be	paid	in M	ay ea	ach y	ear.	-

V – Student (FWS)

- 1. Fill out the form fields above with your information as needed to complete your time report.
- 2. Create a copy of this completed form on your device by either SAVING or PRINTING TO PDF.
- 3. Then click the link below to upload the PDF file you saved in step 2 and submit it in Dynamic Forms. https://www.etsu.edu/bf/redirects/timereportrouting-df.html

SM – Sick leave (Medical Residents only) TR – University Business Travel (Faculty & Admin)

Q – Personal day taken (University School only)

U – Leave without pay

P – Paid overtime

S – Sick leave

W - Worked holiday (Faculty & Admin - Holidays worked)

Y - Worked holiday taken