

**BRS MANUAL MONTHLY TIMESHEET
FOR ASE/STUDENT ASSISTANT with DUAL APPOINTMENTS**

University of California, Berkeley • Berkeley Regional Services • 1008 4th Street • Berkeley, CA 94710 • Phone: (510) 864 - 9000, Option 3

EMPLOYEE NAME: _____	EMPLOYEE ID: _____	MONTHLY PAY PERIOD
TITLE/ RECORD #: _____	DEPT: _____	MONTH _____ YEAR _____

DATE	DAY OF WEEK	PAY CODE	START TIME	END TIME	TOTAL DAILY HOURS	NOTES
1						
2						
3						
4						
5						
6						
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	0	0	0	0	0	

Employee's Signature: _____ Date: ____/____/____ Supervisor's Signature: _____ Date: ____/____/____

**How to submit: Send your completed/signed timesheet to your Supervisor for approval. Supervisors should then send the completed/approved timesheet to: share_payroll@berkeley.edu. In the subject line of the email, include Department name, Department ID/ORG Node, and the name of the employee.*

** For EPSL and EFML COVID-19 related retroactive adjustments: Manual timesheets should be submitted via HR Service Hub with the accompanying EPSL and EFML Form. See COVID-19 process details.*

PAY CODES

- REG: REGULAR HOURS
- HOL: HOLIDAY
- LOA: LEAVE OF ABSENCE (UNPAID)
- LOP: LEAVE WITHOUT PAY
- CTO: COMP TIME OFF
- SKL: SICK LEAVE TAKEN
- VAC: VACATION LEAVE TAKEN
- CV19: PAID ADMIN LEAVE (COVID-19)
- Emergency Paid Sick Leave EE: (EPSL) - Reasons 1-3
- Emergency Paid Sick Leave Family: (EPSL) Reasons 4-6
- EFML - See CalTime Guidance