

UF | UNIVERSITY of FLORIDA

The Foundation for The Gator Nation

OPS TIMECARD

NAME								UFID				ASSIGNMENT ACCT				PAYPERIOD START AND END DATE					
1 ST WEEK								2 ND WEEK						1 ST WEEK		2 ND WEEK					
	FRI	SAT	SUN	MON	TUES	WED	THU		FRI	SAT	SUN	MON	TUES	WED	THU	HRS. WORKED					
IN								IN													
OUT								OUT													
IN								IN													
OUT								OUT													
IN								IN													
OUT								OUT													
TOTAL								TOTAL									TOTAL				

<p>I confirm that the hours shown on this card accurately reflect time worked or to be worked and/or time earned for pay purposes during the period indicated. I understand that falsification of this time worked is cause for immediate dismissal. To be worked hours shown on this card will be adjusted, if necessary, on the next paycard.</p>	<p>I confirm that this employee's effort has been expended on the account shown hereon equal to effort required for compensation purposes, except where the activity reports may reflect effort in another account.</p>	TOTAL PAY PERIOD HOURS	
<hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> Employee's Signature	<hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> Chair/Supervisor's Signature		

Time Worked: Employees should enter the actual time they started and stopped on the time card for each scheduled work day of the pay period. Each work week ends at 12 midnight on Thursdays. All hours worked must be totaled at the end of the work day and the total shall be rounded to the nearest quarter of an hour stated in minutes in accordance with the table below.

ALL TIME ENTERED MUST BE IN QUARTER INCREMENTS (SEE BELOW).

MINUTES WORKED	ROUND TO
0 - 7	00
8 - 22	.25
23 - 37	.50
38 - 52	.75
53 - 60	1.00

Scan & e-mail a copy of the signed and approved OPS Timecard to: OPSTimecards@jax.ufl.edu