

LOUISIANA TECH UNIVERSITY
 ADJUNCT/TEMPORARY/PART-TIME ATTENDANCE REPORT

Name: _____ Department _____

CWID: _____ Month _____ Year _____

ATTENDANCE RECORD

(Mark only days NOT worked that you were scheduled to work)

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				

I CERTIFY THAT I HAVE WORKED MY NORMAL DAILY SCHEDULE. HOURS NOT WORKED ARE INDICATED ABOVE. I UNDERSTAND THAT ANY FALSIFICATION OF REPORTING HOURS WORKED MAY RESULT IN DISCIPLINARY ACTION BY THE UNIVERSITY AND MAY INCLUDE CRIMINAL CHARGES.

 Signature (Employee)

 Signature (Budget Unit Head)

 Signature (Dean)

INSTRUCTIONS

1. Enter name, campus wide ID, department, month and year for the reporting period.
2. Make entries in blocks only if you did NOT work a normal daily schedule.
3. Return attendance reports to the Office of Human Resources not later than the 5th working day of each month.