

BRS MANUAL BI-WEEKLY TIMESHEET

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EMPLOYEE NAME:				UCB EID:	UCB EID:			BI WEEKLY PAY PERIOD:	
TITLE:				DEPT:	_ DEPT:			FROM: TO:	
DATE	DAY OF WEEK		PAY CODE	HOURS	OTHER	START TIME	END TIME	TOTAL DAILY HOURS	
TOTAL									
PAY CODES									
LOA: LEAVE OF ABSENCE (UNPAID)			Employee's Signature: Date:						
LOP: LEAVE WITHOUT PAY PTO: PAID TIME OFF TAKEN			Supervisor's Signature:				Date:		
REG: REGULAR									
SDF: SHIFT DIFFERENTIAL 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			*How to submit: Send your completed/signed timesheet to your Supervisor for approval. Supervisors should then send the completed/approved timesheet to: csstimesheets@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 ServiceNow with the accompanying EPSL and EFML Form. See COVID-19 process details.						