FLORIDA ATLANTIC UNIVERSITY

ON CALL PAYMENT FORM
~~ USPS ONLY ~~

NAME		ID NO.	

DEPARTMENT		TOTAL HOURS WORKED	0.00	PAY PERIOD	

~~ TIME DISTRIBUTION ~~

FIRST WEEK			
DATE	**TIME**		**HOURS**
	FROM	**TO**	

SECOND WEEK			
DATE	**TIME**		**HOURS**
	FROM	**TO**	

IMMEDIATE SUPERVISOR _____ DATE _____

DEAN/DIRECTOR _____ DATE _____

~~~ RETURN TO THE TIMEKEEPER FOR PROCESSING ~~~

On Call Payment Earnings Code is 042

Hours Entered _____ **Date:** _____
Initials

9/17/03