

A time card is the District's official document of an employee's attendance/absence for time reporting purposes.



- The use of the time card is mandated in the Board Rules and is subject to audit by the District's designated auditors.
- Records substantiating the time reported to the Payroll Administration for salary payment must be kept on file and retained at the location for a period in accordance with the prescribed rules.
- Completed and approved absence certification forms, as applicable, are required prior to reporting of absence time and are to be retained on file at the location:
 - Certification of Illness, Family Illness, Or New Child, Form 60.ILL
 - Certification of Absence for Non-Illness, Form 60.NON-ILL
 - Overtime
 - Extra Duty Pay for Administrators Documentation
- All Payroll timecards/timesheets, should be completed, signed and dated by both employee and supervisor by the payroll cut-off deadline for each payroll area (Certificated-CE, Classified-CL, Semi-Monthly-SM) and no later than one week after the end of each month.

The following guidelines are being provided when documenting an employee's time reporting:

1. Employees must document their work time.
2. The documentation process can be done on paper, electronically, or a combination of both.
3. The documentation and process for time documentation must be approved by the supervisor/administrator and discussed with employees.
4. Regardless of the methodology for time documentation – paper or electronic - please refer to the "Instructions for Completing Time Cards" in the Payroll Concepts Manual (page 49 – see below*) on sign-in/out requirements.
5. Time documentation must be stored by the location for retrieval or traceable (if electronic) for audit purposes and in accordance with District Records Retention policies.

If you have any questions, please call Payroll Customer Services at (213) 241-2570, between 8:00 a.m. – 4:00 p.m., Monday through Friday.

* Instructions for Completing Time Cards

Certificated Employees

- Article IX, Section 2 of the UTLA Collective Bargaining Unit Agreement states that: "All employees shall, upon each arrival to and departure from their assigned work location, enter their initials on a form provided by the District. Itinerant employees serving less than a full day at a work location and Early Education Center employees shall also enter the correct time as part of their sign-in and sign-out."
- If the certificated employee has, in addition to his/her regular assignment, a supplemental assignment such as Adult Education, or an additional assignment with personnel number, etc., it is necessary for the employee to enter correct time for both the regular assignment and the supplemental assignment. The employee should have a separate time card for each additional assignment. This is necessary to provide documentation to substantiate the District's claims for federal and state funding.

Periodic Certification Form and the Multi-Funded Time Report Form should be completed for the fiscal year as deemed applicable. Refer to BUL-2643.14 Documentation for Employees Paid from Federal and State Categorical Programs for further guidance.

- The Association of Administrators of Los Angeles (AALA) and District represented employees historically sign-in and sign-out usually by initialing a time card and should continue to do so.

Classified Employees

- Historically, all classified employees, except those identified in Personnel Commission Rule 596 (over-time exempt), sign in by recording the actual time of arrival but not earlier than the assigned start time and sign out by recording the actual time of departure but not later than the scheduled stop time from their assigned work location(s) and should continue to do so. This procedure helps to manage the calculation of overtime.
- Classified employees whose principal duties and responsibilities are designated as executive/administrative in Personnel Commission Rule 596 (over-time exempt), indicate daily attendance by initialing a time sheet or a time card.

Unclassified Employees

- All unclassified employees are required to sign-in and sign-out showing the actual time of arrival but not earlier than the assigned start time to and departure from their assigned work location(s)

Additional Guidelines

The new digital environment sign-in/out cards were designed for all District employees. Employees are categorized based on the type of work they do and how they are paid. In general, the two employee groups are categorized as salaried and hourly. The instructions above for completing the time cards will determine if only initials are required or if a time in and a time out is required.

- Salaried employees are required to initial the sign in and out card.
- Hourly employees are required to time in and time out with actual hours.
- By signing, (electronic or actual signature), employee certifies and agrees to all necessary processing and adjustments that will reflect all time entered on the sign in and out card. Once all necessary adjustments are processed, employee agrees and authorizes that any unearned wages paid as a result will be collected from the employee's next paycheck.

As per policy Bulletin 6638.2, Time Reporting and Time Approval Policy:

- Per the instructions above for completing time cards, employees must sign in and out or initial, on a daily basis.
 - Timecards are to be completed and provided to the Time Reporter(s) for time reporting on a weekly basis (every Friday).
 - Timecards must be completed, signed and provided to the Time Reporters for time reporting by the payroll cut-off deadline for each payroll area: Classified (CL), Certificated (CE), and Semi-Monthly (SM).
 - Time should reflect any benefit being claimed for an absence, such as illness, personal necessity, kin care, vacation, miscellaneous time, etc. Absence certifications and supporting documents must be submitted and approved by the employee's Supervisor.
- Refer to the 2023-2024 Calendar/Time Cards at <https://achieve.lausd.net/Page/19181> for samples of recommended time cards. See attached for a sample time card.

EMPLOYEE PAYROLL TIME RECORD

Pers No	Employee Name	Position Title	Cost Ctr	Location Name	Fund	Funct Area	Person ID	(GC_**JBB)
1234567	Jane Smith	Special Education Asst.	0000000	Shelby Elementary School	000-0000	0000-0000-00000	1234567	"C" BASIS SINGLE TRACK

LOS ANGELES UNIFIED SCHOOL DISTRICT

FISCAL YEAR 2023 - 2024

Pay Period	M	T	W	T	F	S	M	T	W	T	F	S	M	T	W	T	F	S	M	T	W	T	F	S	M	T	W	T	F	S	
JUL	3	4	5	6	7	8	10	11	12	13	14	15	17	18	19	20	21	22	24	25	26	27	28	29	31						
In																															
Out																															
In																															
Out																															

Employee Signature _____ Date _____

Supervisor Signature _____ Date _____

By signing I certify and agree to all necessary processing and adjustments that will reflect all time entered above. Once all necessary adjustments are processed, I agree and authorize that any unearned wages paid as a result will be collected from the next paycheck.

Pay Period	M	T	W	T	F	S	M	T	W	T	F	S	M	T	W	T	F	S	M	T	W	T	F	S	M	T	W	T	F	S	
AUG		1	2	3	4	5	7	8	9	10	11	12	14	15	16	17	18	19	21	22	23	24	25	26	28	29	30	31			
In																															
Out																															
In																															
Out																															

Sample

Employee Signature _____ Date _____

Supervisor Signature _____ Date _____

By signing I certify and agree to all necessary processing and adjustments that will reflect all time entered above. Once all necessary adjustments are processed, I agree and authorize that any unearned wages paid as a result will be collected from the next paycheck.

Pay Period	M	T	W	T	F	S	M	T	W	T	F	S	M	T	W	T	F	S	M	T	W	T	F	S	M	T	W	T	F	S	
SEP					1	2	4	5	6	7	8	9	11	12	13	14	15	16	18	19	20	21	22	23	25	26	27	28	29	30	
In																															
Out																															
In																															
Out																															

Jane Smith 9/29/23

Employee Signature _____ Date _____

Steven 10/2/23
Supervisor

Supervisor Signature _____ Date _____

By signing I certify and agree to all necessary processing and adjustments that will reflect all time entered above. Once all necessary adjustments are processed, I agree and authorize that any unearned wages paid as a result will be collected from the next paycheck.

Pay Period	M	T	W	T	F	S	M	T	W	T	F	S	M	T	W	T	F	S	M	T	W	T	F	S	M	T	W	T	F	S	
OCT		2	3	4	5	6	7	9	10	11	12	13	14	16	17	18	19	20	21	23	24	25	26	27	28	30	31				
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Employee Signature _____ Date _____

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