

Attendant Timesheet Instructions

Purpose of form: The Attendant Timesheet is used to document and certify the Attendant's hours.

Instructions

- 1. Write the Attendant's number.
- 2. Write the Period Beginning and End dates. Time worked should be recorded following the payment schedule.
- 3. Write the Consumer's name. The Consumer is the person receiving the services.
- 4. Write the Attendant's name. The Attendant is the person providing the services.
- 5. Write the month and day of each time the Attendant worked. The first day of each pay period is Sunday.
- 6. Write the start time and stop time for each day the Attendant worked.
 - a. Two sets of start and stop time columns are provided for those who work twice in the same day.
 - b. If the Attendant works only one time per day, use only one set of start and stop time columns.
 - c. Remember to write AM or PM for each time written.
 - d. Hours must be recorded in 15-minute increments (i.e. 1:00 PM, 1:15 PM, 1:30 PM, 1:45 PM).
- 7. Add the total number of hours together for both sets of columns. Write the number in the Total Hours column.
- 8. Add the total number of hours worked for each week. Write the number on the total hours for week 1 line.
- 9. Repeat steps 5 8 for week 2.
- 10. Total the hours worked for both weeks. Write the number on the total hours for both weeks line.
- 11. The Attendant signs the timesheet.
- 12. The Consumer or legal representative signs the timesheet.
- 13. The timesheet must be dated after the Attendant's last shift on the last day worked.

Helpful Hints

- Please write clearly with black ink.
- Timesheets cannot be submitted before all of the hours have been worked.
- The Attendant may not submit timesheets while the Consumer is hospitalized, in a nursing facility or receiving services through another state program.
- The payroll week begins on Sunday and ends on Saturday.
- The submitted hours must not exceed the weekly hours approved by NC Independent Living.
- Timesheets are accepted until 11:59 PM (Eastern Standard Time) on the due date.
- Late timesheets will be held until the next pay period.



Sample Attendant Timesheet

| | | | | | | | Write Attendant number. |
|---|-----------------------|------------------------------|-----------------------------|---------------------------------|-----------------------------|----------------------|-----------------------------------|
| Attendant Num | ber: XX | xxxx | _ | | | | 2. Write period dates. |
| Period Begins: | 08/10/ | 14 | Consumer | r Name: <u>John</u> | n Doe | | 3. Write Consumer name. |
| | | | | | | | |
| Period Ends: _ | 08/23/ | 14 | _ Attendant | Attendant Name: <u>Jane Doe</u> | | | |
| Day of Week | Date mo/day | Start time hh:mm am/pm | Stop time hh:mm am/pm | Start time hh:mm am/pm | Stop time hh:mm am/pm | Total Hours hh:mm | name. |
| SUNDAY | 08/10 | 8 AM | 12 PM | 1:30 PM | 4 PM | 6.5 | 1 |
| MONDAY | | | | | | | 5. Write month and day worked. |
| TUESDAY | | | | | | | 6. Write start and |
| WEDNESDAY | | | | | | | stop time for each |
| THURSDAY | | | | | | | day worked. |
| FRIDAY | | | | | | | 7. Add total hours. |
| SATURDAY | | | | | | | 8. Add total hours |
| | | | | Total hours for week 1:6.5 | | | |
| SUNDAY | 08/17 | 8 AM | 12 PM | 1:15 PM | 4 PM | 6.75 | |
| MONDAY | | | | <u> </u> | | | 9. Repeat 5-8 |
| TUESDAY | | | | | | | for week 2. |
| WEDNESDAY | | | | <u> </u> | | | 1 |
| THURSDAY | | | | | | | 1 |
| FRIDAY | 08/22 | 8:30 AM | 12 PM | <u> </u> | | 3.5 | 1 |
| SATURDAY | | | | <u> </u> | | | 1 |
| | | | т | Total hours for | 1400k 2: | 10.25 | _ |
| Total Hours for Week 2. | | | | | | | 10. Total hours for |
| Total hours for both weeks:16.75 | | | | | | | both weeks. |
| I certify that I worked the hours shown on this timesheet on the days indicated, and that this timesheet has been signed by the person receiving the services or his or her legal representative. | | | | | | | 14 Augustant |
| Attendant Signature: Date: | | | | | | | 11. Attendant signs. |
| | | | | | | | |
| As the person receiving the services, I certify that the Attendant's hours shown on this timesheet are correct and that the work was performed satisfactorily. | | | | | | | 12. Consumer signs. |
| Consumer Signature: Date: | | | | | | | 13. Date must be after last shift |
| | | | | | | | worked. |