

State of Connecticut
 Department of Emergency Services and Public Protection
 Commission on Fire Prevention and Control
 Connecticut Fire Academy

Payroll Timesheet

Name:	Print Name	Signature
	Employee Number	Date: - <i>Must be dated on or after last date worked</i> I affirm by my signature above that the hours claimed were actually spent in the performance of my official duties for the Commission on Fire Prevention and Control.

This form shall be used to document the payroll submission for one type of activity from the list below. Do not complete more than one Section on this form. Submit a separate form for each type of separate activity.

- Section 1 – Training Activities
- Section 2 – Certification Activities, Administrative Projects

Payroll Procedure: Payroll is processed bi-weekly. To ensure prompt payroll processing, this form must be completed and **submitted to the appropriate Division weekly** per DESPP/CFA Policy 01-03.

Section 1				Training Activities				Code: DPS 32253			
Program:				Location:							
Session:	1	2	3	4	5	6	7				
Date:											
Day – D Night- N	D N	D N	D N	D N	D N	D N	D N				
Hours:											
								Total Hours Taught:			
								Prep Hours:		Hours To be Paid:	

Section 2											
Check Applicable Box		<input type="checkbox"/>	Certification Code DPS 32255			<input type="checkbox"/>	Administrative Code DPS 32251				
Activity or Examination Type:				Location:							
Date:		Hours:		Day – D Night- N		Hours Worked					

Approval:		Date Approved:	
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FY2020
BR2020