



DEPARTMENT OF THE NAVY
NAVAL LEGAL SERVICE COMMAND
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IN REPLY REFER TO

12630
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MEMORANDUM FOR DISTRIBUTION

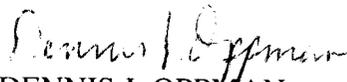
Subj: CIVILIAN TIME AND ATTENDANCE (T&A) GUIDANCE

Ref: (a) DOD FMR 7000.14-R, Volume 8 of 12 Feb 02
(http://www.dtic.mil/comptroller/fmr/08/08_02.pdf)

Encl: (1) T&A Models
(2) Sign in/Sign out Sheet
(3) OPM Form 71
(4) T&A Summary Form
(5) Leave Documentation & Record Keeping

1. In support of reference (a), we have provided enclosures (1) through (5) as specific guidance related to the two models of reporting civilian T&A within NLSC. Please contact Code 64 if your command desires to change their current T&A model.

2. Questions regarding this memorandum or enclosures should be directed to Ms. Amy Stevens at 202-685-5286 or DSN 325-5286.


DENNIS J. OPPMAN
By direction

Distribution:
Naval Legal Service Command (NLSC)

Time and Attendance Models

The Standard Labor Data Collection and Distribution Application (SLDCADA) is the reporting system for all civilian time and attendance. Commands may report time in SLDCADA in one of two basic models outlined below. Each command may choose their preferred model of reporting T&A, but Code 64 strongly encourages commands to use Model 2 as it is usually more efficient.

Model 1: Command Timekeeper Input (Centralized)

1. Employee records T&A on a paper time card.
2. Supervisor approves employee T&A by signing paper time card.
3. Command Timekeeper collects all paper time cards.
4. Command Timekeeper enters T&A as reported on paper time card into SLDCADA by the T&A deadline each pay period.

Model 2: Employee Self-Input (Decentralized)

1. Employee records T&A in SLDCADA
2. Supervisor approves employee T&A by electronically certifying T&A in SLDCADA.
3. Command Timekeeper monitors SLDCADA reports to ensure all electronic certifications are completed by the T&A deadline each pay period.
4. Command Timekeeper maintains electronic record of T&A

Similarities between the Models:

- Methods exist to ensure employees are paid even if the supervisor is unavailable at the close of the pay period
- Prior T&A corrections can be made as necessary
- Code 64 supports Command Timekeepers as necessary.

Differences between the Models:

- Model 1 employees request leave via paper OPM Form 71. Model 2 employees and supervisors request/approve leave electronically.
- Model 2 command timekeepers locally manage creating/editing new user accounts and train command SLDCADA users from guidance provided by Code 64.
- Model 2 users must complete SLDCADA access forms agreements to participate in the self-input model.
- T&A deadlines may be earlier for the Model 1 commands to ensure the command timekeeper has sufficient time to input all timecards.

Reporting Time and Attendance: Centralized Commands

Day-to-Day:

We strongly advise commands to use sign in/sign out sheets (Enclosure 2) to maintain daily accountability for all employees.

Responsibilities per Pay Period:

Employees:

- Sign SLDCADA user account form
- Request Leave via SF71 (Enclosure 3)
- Record T&A via Time and Attendance Summary form (Enclosure 4)
- Record T&A corrections via Time and Attendance Summary form and note "CORRECTED TIME CARD" on the top of the form
- Provide leave documentation to Command Timekeeper as necessary (See Enclosure 5)

Supervisors:

- Sign SLDCADA user account form
- Sign SLDCADA certification form
- Approve/Disapprove leave request via OPM Form 71
- Approve/Amend T&A via Time and Attendance Summary form
- Approve/Amend T&A corrections via Time and Attendance Summary form

Command Timekeepers:

- Sign SLDCADA user account form
- Serve as a local command resource for T&A questions that may arise
- Collect all approved timecards each pay period*
- Enter all approved timecards into SLDCADA no later than the T&A deadline each pay period
- Forward leave documentation to Code 64 as necessary (See Enclosure 5)
- Maintain 6 years of employee T&A records on site

*If an employee/supervisor has not provided an approved timecard, the timekeeper must contact the employee/supervisor to ensure the timecard is provided for record keeping purposes. This may require a T&A correction be entered for the employee if the timecard is received after the T&A deadline.

Reporting Time and Attendance: Decentralized Commands

Day-to-Day:

We strongly advise commands to use sign in/sign out sheets (Enclosure 2) to maintain daily accountability for all employees.

Responsibilities per Pay Period:

Employee:

- Sign SLDCADA user account form
- Request leave electronically via SLDCADA
- Record T&A electronically via SLDCADA
- Record T&A corrections electronically via SLDCADA
- Provide leave documentation to Command Timekeeper/Supervisor as necessary (Please see the “Leave Documentation” instruction for additional guidance)

Supervisor:

- Sign SLDCADA user account form
- Sign SLDCADA certification form
- Approve/Disapprove leave request via SLDCADA
- Approve/Amend T&A via SLDCADA
- Approve/Amend T&A corrections via SLDCADA

Command Timekeeper:

- Sign SLDCADA user account form
- Serve as a local command resource for T&A questions that may arise
- Manage SLDCADA user accounts and train command users in SLDCADA
- Review SLDCADA certification reports to ensure all T&A certifications are completed by the T&A deadline *
- Forward leave documentation to Code 64 as necessary (Please see the “Leave Documentation” instruction for additional guidance)
- Maintain 6 years of electronic employee T&A records on site

*If certification is not completed by the deadline, the supervisor must sign a “Manual Certification” SLDCADA report attesting to the accuracy of the employee’s T&A as soon as possible after the T&A deadline. This paper will be retained as the official employee T&A record for that pay period.

Date: From:		To:		JAG 64.2 Sign In/Out	
Day	Name	In	Out	Comment	
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					

REQUEST FOR LEAVE OR APPROVED ABSENCE

1. NAME (Last, First, Middle Initial)			2. EMPLOYEE OR SOCIAL SECURITY NUMBER			
3. ORGANIZATION Office of the Judge Advocate General (Code)						
4. TYPE OF LEAVE/ABSENCE <i>(Check appropriate box(es) below.)</i>	DATE		TIME		TOTAL HOURS	5. FAMILY AND MEDICAL LEAVE
	From:	To:	From:	To:		
<input type="checkbox"/> Accrued Annual Leave						If annual leave, sick leave, or leave without pay will be used under the Family and Medical Leave Act of 1993, please provide the following information: <input type="checkbox"/> I hereby invoke my entitlement Family and Medical Leave for: <input type="checkbox"/> Birth/Adoption/Foster Care <input type="checkbox"/> Serious Health Condition of Spouse, Son, Daughter, or Parent <input type="checkbox"/> Serious Health Condition of Self Contact your supervisor and/or your personnel office to obtain additional information about your entitlements and responsibilities under the Family and Medical Leave Act of 1993.
<input type="checkbox"/> Restored Annual Leave						
<input type="checkbox"/> Advance Annual Leave						
<input type="checkbox"/> Accrued Sick Leave						
<input type="checkbox"/> Advance Sick Leave						
Purpose: <input type="checkbox"/> Medical/dental/optical examination of requesting employee <input type="checkbox"/> Other <input type="checkbox"/> Care of family member/bereavement, including medical/dental/optical examination of family member						
<input type="checkbox"/> Compensatory Time Off						
<input type="checkbox"/> Other Paid Absence <i>(Specify in Remarks)</i>						
<input type="checkbox"/> Leave Without Pay						
6. REMARKS:						
7. CERTIFICATION: I hereby request leave/approved absence from duty as indicated above and certify that such leave/absence is requested for the purpose(s) indicated. I understand that I must comply with my employing agency's procedures for requesting leave/approved absence (and provide additional documentation, including medical certification, if required) and that falsification of information on this form may be grounds for disciplinary action, including removal.						
EMPLOYEE SIGNATURE			DATE			
8. OFFICIAL ACTION ON REQUEST: <input type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED (If disapproved, give reason. If annual leave, initiate action to reschedule.)						
SIGNATURE			DATE			
PRIVACY ACT STATEMENT						
Section 6311 of title 5, United States Code, authorizes collection of this information. The primary use of this information is by management and your payroll office to approve and record your use of leave. Additional disclosures of the information may be: To the Department of Labor when processing a claim for compensation regarding a job connected injury or illness; to a State unemployment compensation office regarding a claim; to Federal Life Insurance or Health Benefits carriers regarding a claim; to a Federal, State, or local law enforcement agency when your agency becomes aware of a violation or possible violation of civil or criminal law; to a Federal agency when conducting an investigation for employment or security reasons; to the Office of Personnel Management or the General Accounting Office when the information is required for evaluation of leave administration; or to the General Services Administration in connection with its responsibilities for records management.						
Where the employee identification number is your Social Security Number, collection of this information is authorized by Executive Order 9397. Furnishing the information on this form, including your Social Security Number, is voluntary, but failure to do so may result in disapproval of this request.						
If your agency uses the information furnished on this form for purposes other than those indicated above, it may provide you with an additional statement reflecting those purposes.						

TIME & ATTENDANCE SUMMARY (TAS)

ACTIVITY NAME _____ CODE _____ UIC _____

PAY PERIOD ENDING DATE: _____ ORG CODE: _____

SSN: _____	NAME: _____
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	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Week 1							
Week 2							

I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT:

PRINTED NAME OF AUTHORIZING OFFICIAL

SIGNATURE

DATE

QUICK REFERENCE OF MOST COMMONLY USED PAY/NON-PAY LEAVE CODES:

- | | | |
|----------------------|-----------------------------|-------------------------------|
| LA – Annual leave | LM – Military | LY – Time-Off Leave Award |
| LB – Advanced Annual | LN – Administrative | KA – Leave without Pay |
| LC – Court | LS – Sick Leave | CE – Compensatory Time Earned |
| LG – Advanced Sick | LT – Traumatic Injury (COP) | CT – Compensatory Time Taken |
| LH – Holiday | LU – Day of Injury | |

FAMILY LEAVE:

- When using leave under the Family Medical Leave Act (FMLA), indicate the appropriate family leave code in parentheses after the pay/non-pay leave code and hour(s):
 - DA: Birth of son/ daughter or care of newborn.
 - DB: Adoption or foster care.
 - DC: Care for spouse, son, daughter, or parent with a serious health condition.
 - DD: Serious health condition of employee.

- When using Sick Leave (LS) or Advanced Sick Leave (LG) under the Federal Employee Family Friendly Leave Act (FEFFLA), indicate the appropriate family leave code in parentheses after the pay/ non-pay leave code and hour(s):
 - DE: FEFFLA Family Care/ Bereavement.
 - DF: Adoption related.

Leave Documentation & Record-Keeping

Employees are required to provide various kinds of leave documentation to their division/command's timekeeper. The timekeeper is responsible to forward the appropriate documentation to Code 64. Below are examples of documentation timekeepers must supply to Code 64:

- Military Leave (LM)
- Court Leave (LC)
- Change in work schedule
- Compensatory Time Approval (≥ 8 hours per pay period)
- Travel Compensatory Time Approval (≥ 8 hours per pay period)
- Overtime Request (only OJAG can approve overtime; a local supervisor may NOT approve overtime)
- Advanced Sick Leave
- Advanced Annual Leave

Copies of all listed documentation must be maintained locally at individual command's for 6 years to meet audit requirements.

- Approved employee time and attendance (paper or electronic copy)
- Correction to employee time and attendance (paper or electronic copy)
- Military orders
- Court leave documentation
- All compensatory time approvals
- All overtime requests/approvals signed by 64
- Work schedule changes
- Sign in/Sign out sheets
- Leave requests/approvals (paper or electronic)
- DD Form 577 (required to be completed by supervisors only; located at <http://www.dtic.mil/whs/directives/infomgt/forms/eforms/dd0577.pdf>)