

Associates for Training and Development

Advancing Workforce Development for Mature Workers since 1983

Maine Participant Payroll Guide

This guide includes the follow information to assist with the submission of timesheets for bi-weekly payroll processing:

- A) Blank timesheet
- B) Sample completed timesheet
- C) Payroll cycle schedule
- D) Payroll cycle Explanation of Host Agency in-kind donations

Timesheets

It is your responsibility to complete and submit your timesheet because this is a requirement of most jobs. SCSEP staff or your Host Agency supervisor can help you if you have questions, and your Host Agency Supervision is responsible for approving your timesheet.

Host Agency hours:

You should record the exact number of hours, rounded to the $\frac{1}{4}$ hour, spent training at the Host Agency next to the appropriate day of the week in the “# of Hours at Host Agency” column. Only the hours you were physically present at the Host Agency should be recorded.

Off-Site Training (Meetings and Trainings NOT at your Host Agency):

If you attended a Network to Work Meeting or another off-site training assignment (ex. Resume Writing, MS Office Suite computer training classes, etc.) as directed by SCSEP staff, you will put those hours in the appropriate “# of Hours at Off-Site Training” column. Be sure to provide a brief description of the training (i.e. name of class and provider) in the column headed “Explanation of Off-Site Training”.

Total Hours:

Record the **total** number of Host Agency **and** Off-Site Training hours in the Total Daily Hours column in the row for the appropriate day of the week. **Participants may not train more than 8 hours a day.** Please also enter the total number of hours for each column.

Signatures:

Participant: After you have completed your training for the payroll cycle and entered all of your hours, be sure to sign and date your timesheet. Then give the timesheet to your Host Agency supervisor for completion. **Timesheets submitted in advance of actual training hours recorded being performed will not be accepted.**

Host Agency supervisor: At the end of your last day of training in the payroll period, please ask your Host Agency supervisor to **fill in the value of in-kind contributions from non-federal sources** for the period (in the lower left corner of the timesheet) (if the value is zero, please enter 0) and **sign & date** the timesheet.

Once your Host Agency supervisor reviews and signs your timesheet (ideally your last day of training in the payroll period), fax or email it to the SCSEP finance office using the 800# or email address printed in the upper left-hand corner of your timesheet. You should keep your original timesheet for your reference. You will not need to send that to us.

Before submitting your timesheet, be sure it has:

- ✓ *Your name*
 - ✓ *Your Host Agency name*
 - ✓ *Training dates*
 - ✓ *# of Host Agency training hours, rounded to the ¼ hour entered for each day you trained*
 - ✓ *The total Host Agency hours for the two-week pay period*
 - ✓ *# of Off-Site training hours, rounded to the ¼ hour, entered as appropriate, including an explanation of training*
 - ✓ *The total Off-Site training hours for the two-week pay period*
 - ✓ *Combined daily total of Host Agency and Off-Site training hours*
 - ✓ *Your signature & date signed*
 - ✓ *Your Host Agency supervisor's signature & date signed*
 - ✓ *Any Host Agency non-federal in-kind donation information*
-

Completed timesheets are to be faxed or emailed no later than the close of business on the last Friday of the payroll cycle, (or Saturday if participant is scheduled to train on Saturdays). Any late timesheets received will be processed in the following pay period and your paycheck will be delayed by two weeks. Therefore it is critical for you to submit your timesheets in a timely manner.

Direct deposit of your payroll check is strongly encouraged. If you are unable to receive direct deposit you will be issued a Payroll Debit Card.

In the event you are unable to train during your regularly scheduled hours because your host training site may be closed for any reason (holidays, etc.), you may make up your hours within the payroll period.

Your bi-weekly payroll paystubs and annual W2 forms will be mailed to the address you have provided us. **Please notify us as soon as possible of any changes to your mailing address information.** Also, **please keep a file of your payroll paystubs and W2 forms** for future wage verification requirements from other assistance programs.

If you have any questions, please call your Case Management Participant Assistant or Regional Coordinator for assistance.

Thank you!

SCSEP - Participant Timesheet

Please FAX Timesheet to: 1-800-608-9418 or scan & email to FinanceME@a4td.org

Please enter your hours, sign, have supervisor enter in-kind value & sign, fax or email timesheet at the end of your last day of training in the payroll period.

Participant Name:				Host Agency Name:	
TRAINING DAYS	TRAINING DATES	# of HOURS at HOST AGENCY	# of HOURS at OFF-SITE TRAINING	TOTAL DAILY HOURS	
Sunday					
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Saturday					
Sunday					
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Saturday					
Total hours for each column:				HOST AGENCY	OFF-SITE
				TOTAL	
Participant Signature (please sign on line above)					
Date					
I certify that this is a true and accurate reporting of time worked and reported for the SCSEP Program. I also certify that in-kind contributions are from NON-FEDERAL sources and these contributions have not been claimed on any other federal program.					
IN KIND Donations by HOST AGENCY (Site Supervisor Completes)					
Please enter the value of Supervisor's in-kind wages donated: Hourly wage rate X # of hours spent supervising/training the participant = \$ -					
Host Agency Signature (please sign on line above)					
Date					



Please FAX Timesheet to: 1-800-608-9418 or scan & email to FinanceME@a4td.org
Please enter your hours, sign, have supervisor enter in-kind value & sign, fax or email timesheet at the end of your last day of training in the payroll period.

Participant Name: Grace Potter				Host Agency Name:	Restore
TRAINING DAYS	TRAINING DATES	# of HOURS at HOST AGENCY	# of HOURS at OFF-SITE TRAINING	TOTAL DAILY HOURS	EXPLANATION of OFF-SITE Training Hour Activities (Examples: SCSEP Orientation Services; NTW = Network to Work; GED Class; KLS; GCF; GSU = Get Set Up; T4T = Tech for Tomorrow; Coursera; PCA Course online; ServSafe Class; MS Word Class at AJC; ESL Class at Center for Workforce Development; Mentor Meeting, etc.)
Sunday	3/31/2024			-	
Monday	4/1/2024	4.00	-	4.00	
Tuesday	4/2/2024	4.00	-	4.00	
Wednesday	4/3/2024	4.00	-	4.00	
Thursday	4/4/2024	4.00	-	4.00	
Friday	4/5/2024	4.00	-	4.00	
Saturday	4/6/2024			-	
Sunday	4/7/2024			-	
Monday	4/8/2024	4.00	-	4.00	
Tuesday	4/9/2024	4.00	-	4.00	
Wednesday	4/10/2024	4.00	-	4.00	
Thursday	4/11/2024	-	4.00	4.00	NTW Meeting: 4
Friday	4/12/2024	4.00	-	4.00	
Saturday	4/13/2024			-	
Total hours for each column:				HOST AGENCY 36.00 OFF-SITE 4.00 TOTAL 40.00	The undersigned hereby certifies that the hours reported above are correct for the period indicated and DO NOT include lunch time.
Participant Signature (please sign on line above)					4/12/2024
Date					
IN KIND Donations by HOST AGENCY (Site Supervisor Completes)					
Please enter the value of Supervisor's in-kind wages donated: Hourly wage rate X # of hours spent supervising/training the participant = \$200 - 00					
Host Agency Signature (please sign on line above)					4/12/2024
Date					



Please FAX Timesheet to: 1-800-608-9418 or scan & email to FinanceME@a4td.org

Please enter your hours, sign, have supervisor enter in-kind value & sign, fax or email timesheet at the end of your last day of training in the payroll period.

Participant Name: George Harrison					Host Agency Name:
TRAINING DAYS	TRAINING DATES	# of HOURS at HOST AGENCY	# of HOURS at OFF-SITE TRAINING	TOTAL DAILY HOURS	
Sunday	3/31/2024			-	
Monday	4/1/2024	-	6.00	6.00	
Tuesday	4/2/2024	-	6.00	6.00	
Wednesday	4/3/2024	-	6.00	6.00	
Thursday	4/4/2024	-	6.00	6.00	
Friday	4/5/2024	-	6.00	6.00	
Saturday	4/6/2024			-	
Sunday	4/7/2024			-	
Monday	4/8/2024	-	6.00	6.00	
Tuesday	4/9/2024		6.00	6.00	
Wednesday	4/10/2024	-	6.00	6.00	
Thursday	4/11/2024	-	6.00	6.00	
Friday	4/12/2024	-	6.00	6.00	
Saturday	4/13/2024			-	
Total hours for each column:				60.00	
HOST AGENCY				60.00	
OFF-SITE				60.00	
TOTAL				60.00	

IN KIND Donations by HOST AGENCY (Site Supervisor Completes)		Date
Please enter the value of Supervisor's in-kind wages donated: Hourly wage rate X # of hours spent supervising/training the participant = \$ -		4/12/2024

Participant Signature (please sign on line above)		Date
George Harrison		4/12/2024

I certify that this is a true and accurate reporting of time worked and reported for the SCSEP Program. I also certify that in-kind contributions are from NON-FEDERAL sources and these contributions have not been claimed on any other federal program.		Date
Etha James		4/12/24

Host Agency Signature (please sign on line above)		Date



ASSOCIATES FOR TRAINING & DEVELOPMENT

2020 / 2021 Payroll Periods and Date Payments Issued

Maine

Fax to: 1-800-608-9418 or scan email to: FinanceME@a4td.org

Weeks Ending Saturday				Date Payment Issued		
20-Jun	and	27-Jun	2020	Thurs.	2-Jul	2020
4-Jul	and	11-Jul	2020	Friday	17-Jul	2020
18-Jul	and	25-Jul	2020	Friday	31-Jul	2020
1-Aug	and	8-Aug	2020	Friday	14-Aug	2020
15-Aug	and	22-Aug	2020	Friday	28-Aug	2020
29-Aug	and	5-Sep	2020	Friday	11-Sep	2020
12-Sep	and	19-Sep	2020	Friday	25-Sep	2020
26-Sep	and	3-Oct	2020	Friday	9-Oct	2020
10-Oct	and	17-Oct	2020	Friday	23-Oct	2020
24-Oct	and	31-Oct	2020	Friday	6-Nov	2020
7-Nov	and	14-Nov	2020	Friday	20-Nov	2020
21-Nov	and	28-Nov	2020	Friday	4-Dec	2020
5-Dec	and	12-Dec	2020	Friday	18-Dec	2020
19-Dec	and	26-Dec	2020	Thurs	31-Dec	2020
2-Jan	and	9-Jan	2021	Friday	15-Jan	2021
16-Jan	and	23-Jan	2021	Friday	29-Jan	2021
30-Jan	and	6-Feb	2021	Friday	12-Feb	2021
13-Feb	and	20-Feb	2021	Friday	26-Feb	2021
27-Feb	and	6-Mar	2021	Friday	12-Mar	2021
13-Mar	and	20-Mar	2021	Friday	26-Mar	2021
27-Mar	and	3-Apr	2021	Friday	9-Apr	2021
10-Apr	and	17-Apr	2021	Friday	23-Apr	2021
24-Apr	and	1-May	2021	Friday	7-May	2021
8-May	and	15-May	2021	Friday	21-May	2021
22-May	and	29-May	2021	Friday	4-Jun	2021
5-Jun	and	12-Jun	2021	Friday	18-Jun	2021
19-Jun	and	26-Jun	2021	Friday	2-Jul	2021
3-Jul	and	10-Jul	2021	Friday	16-Jul	2021

If you do not elect to use Direct Deposit, you will be issued a Payroll Debit Card that will be sent to the mailing address you have provided.

Host Agency "In-Kind" SCSEP Grant Match Contributions

- ❖ The US Department of Labor requires Senior Community Service Employment Program (SCSEP) administrators to raise at least 10 % of the total cost of activities carried out under their grant projects through resources from the community base it serves.
- ❖ This matching requirement is primarily met with a non-cash donation from our host agency partners. This is called an "in-kind" contribution.
- ❖ Most in-kind contributions to our SCSEP project come in the form of the value of the time spent by host agency personnel directly supervising and training program participants.
- ❖ Direct supervision includes any one-on-one time a supervisor spends with a program participant for example, teaching him/her a new skill, actively supervising his/her work, explaining a task, answering their questions, etc.
- ❖ In-kind donations may only come from **Non-Federally** funded sources. Here are a few examples for determining in-kind contributions. In each case, the site supervisor is paid \$25 per hour and spends 4 hours per week directly supervising or training a program participant. The calculation for the value of these services would be \$25 per hour * 8 hours over the two week payroll cycle = \$200 :
 - A host site is 100% privately or state funded. Since the site supervisor's position is privately funded, in this case the whole \$200 value may be recorded as an in-kind contribution.
 - A host site is 50% privately or state funded and 50% federally funded. Since the supervisor's position is 50% federally funded, only half of the \$200 (or \$100) may be recorded as an eligible in-kind contribution.
 - A host site is 100% federally funded. Since the supervisor's position is 100% federally funded in this case, none of the \$200 value of the services provided may be recorded as an in-kind contribution.
- ❖ If you have any questions, please don't hesitate to contact our local Training Center staff. We really appreciate the important work you do with training SCSEP participants.

Please see reverse side for the in-kind donation recording guide
PLEASE SEE REVERSE SIDE FOR THE IN-KIND DONATION RECORDING GUIDE

Where & When are "In-Kind" Donations recorded?

- ❖ In-kind contributions are recorded on SCSEP participant timesheets, bi-weekly, in the space just to the left of the host agency supervisor signature. (please see the host agency section depicted below, as it appears at the bottom of the timesheet).

IN KIND Donations by HOST AGENCY (Site Supervisor Completes)		I certify that this is a true and accurate reporting of time worked and reported for the SCSEP Program. I also certify that in-kind contributions are from NON-FEDERAL sources and these contributions have not been claimed on any other federal program.	/ / 20##
Please enter the value of Supervisor's in-kind wages donated: Hourly wage rate X # of hours spent supervising/training the	\$ _____		

- ❖ Please remember, we can only take credit for Non-Federally funded donations. So if your host agency is not federally funded or only partially federally funded, please record the value of your in-kind donation on our participant's time sheet each payroll cycle. When the supervisor signs the timesheet they certify that the in-kind contributions recorded are from Non-Federal sources and they have not been claimed as a match on any other federal program.

We value your partnership and support of our Mature Workers!