PTO ACCRUAL & PAYROLL TRACKER

Corporate Payroll & HR Compliance Template

Document ID _____

Effective Date _____

Employee Profile & Accrual Rules

Employee Name	_____	**Employee ID**	_____
Department	_____	**Job Title**	_____
Hire Date	_____	**Accrual Start Date**	_____
Accrual Frequency	_____	**Current Tier Group**	_____

Paid Time Off (PTO) Policy Guidelines

Accrual Rate Details

Accrual Rate Per Period: _____ hrs

Annual Target Accrual: _____ hrs

Maximum Accrual Cap: _____ hrs

Rollover & Payout Rules

Max Rollover (Calendar Year): _____ hrs

Rollover Expiry Date: _____

Termination Payout Policy: _____

PTO Accrual & Usage Ledger

Policy Acknowledgement & Approval

By signing below, the Employee and the HR/Payroll Representative acknowledge that the accrued vacation/sick time and corresponding guidelines listed above are accurate and conform to the standard operating procedures of the Company's established payroll policies.

_____

Employee Signature

Date: _____

_____

Payroll / HR Administrator Signature

Date: _____