



**Hill Country Payroll**  
**Leave Time Accrual Worksheet**

**Company** \_\_\_\_\_

**Type of Leave:**

**Sick** \_\_\_\_\_  
**Vacation** \_\_\_\_\_  
**Personal** \_\_\_\_\_

**Accrual Year**

Calendar \_\_\_\_\_  
 Anniversary \_\_\_\_\_  
 Company Fiscal Year \_\_\_\_\_

**How is leave earned?**

Hrs Worked \_\_\_\_\_  
 Per Month \_\_\_\_\_  
 Per Pay Period \_\_\_\_\_  
 Per Year \_\_\_\_\_

**Is there a minimum employee must work to qualify for accrual?**

Yes \_\_\_\_\_ # of Hours (per pay period) \_\_\_\_\_  
 No \_\_\_\_\_

**Do employees have a waiting period before they can take their leave?**

Yes \_\_\_\_\_ # of Days \_\_\_\_\_  
 No \_\_\_\_\_

**Does accrual start from hire date?**

Yes \_\_\_\_\_  
 No \_\_\_\_\_ # of Days \_\_\_\_\_

**Accrual # 1**

Continuously until termed \_\_\_\_\_  
 Stops at day # \_\_\_\_\_  
 Amount they earn  
 \_\_\_\_\_ Hours Per (hr, month, pay period, yr) \_\_\_\_\_ Worked.

**Accrual #2**

Stops at day # \_\_\_\_\_  
 Amount they earn  
 \_\_\_\_\_ Hours Per (hr, month, pay period, yr) \_\_\_\_\_ Worked

**Accrual #3**

Stops at day # \_\_\_\_\_  
 Amount they earn  
 \_\_\_\_\_ Hours Per (hr, month, pay period, yr) \_\_\_\_\_ Worked

**Can the employee carry over amounts from year to year?**

Yes \_\_\_\_\_ # of Hours \_\_\_\_\_  
 No \_\_\_\_\_

**Is there a maximum amount an employee can have available?**

Yes \_\_\_\_\_ # of Hours \_\_\_\_\_  
 No \_\_\_\_\_

Please submit a copy of your leave time policy along with this worksheet.