**DAILY MAN-HOUR FORM**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Office/College: | **(1)** |  |  | Name of Personnel: | **(3)** |  |
| Unit: | **(2)** |  |  | Position Title: | **(4)** |  |

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| **#** | **WORK ELEMENT**  **(5)** | **DELIVERABLES** | | | **TIME** | | | **MONTHLY OCCUPANCY PATTERN FOR EACH WORK ELEMENT (11)** | | | | | | | | | | | |
| Ave. # of Deliverables  **(6)** | Unit of Deliverables  **(7)** | Unit of re-occurrence  **(8)** | Time  **(9)** | Unit  **(10)** | | JAN | FEB | MAR | APR | MAY | JUN | JUL | AUG | SEPT | OCT | NOV | DEC |
| 1 |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |
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| 4 |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |
| 11 |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |
| 12 |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |
| 13 |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |
| 14 |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |
| 15 |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |
| ***(Continue on separate sheet if necessary)*** | | | | | | | | | | | | | | | | | | | |
| ***LEGEND: VH - Very High H – High N - Normal L – Low VL - Very Low*** | | | | | | | | | | | | |

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| Prepared by: |  | Noted by: |
|  |  |  |
| *Signature over Printed Name of Employee / Date* |  | *Immediate Supervisor / Date* |