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THIS REPORT MUST BE COMPLETED, ATTACHED TO YOUR TIMESHEET AND SUBMITTED THROUGH YOUR SUPERVISOR ANYTIME YOU ARE AWAY FROM YOUR JOB. SEND ORIGINAL TO PAYROLL. KEEP COPY FOR YOUR RECORDS.

ABSENCE REPORT

NAME _____ DEPT _____ DATE _____

REASON FOR ABSENCE

	#HOURS	DATE(S) TAKEN	
ANNUAL LEAVE	_____	_____	
COMPENSATORY TIME	_____	_____	
JURY DUTY	_____	_____	
SICK LEAVE FOR:			
MYSELF	_____	_____	REASON _____
FAMILY MEMBER	_____	_____	REASON _____
OTHER	_____	_____	REASON _____

I certify that the above leave was taken in accordance with University Policy.

Employee Signature	Date	Approved by	Date	Charge Date, Payroll
_____	_____	_____	_____	_____

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