Print Clear Form

FACULTY/EXEMPT EMPLOYEE ABSENCE REPORT

This Absence Report must be used to support the blue slips submitted and should be completed on a daily basis. This report will assist your supervisor in monitoring your hours worked. At the end of the pay period sign this report and submit it to your supervisor for signature. This report will then be forwarded to the Library Office. You are also required to enter your absences electronically. The time entered on this sheet will be used to correct any discrepancies on your electronic submission.

Employee Name_____Pay Period_____

Job Location_____Campus/ East or West

Day	Date	Pers. Hours	Sick Hours	Vac. Hours	Other Hours	*Other Reason

Day	Date	Pers. Hours	Sick Hours	Vac. Hours	Other Hours	*Other Reason

*Other Reasons: J=Jury, M=Military, P=Professional, LWOP=Leave Without Pay, CC=College Closed, CAC=College Area Closed, FMLA=Family Medical Leave ACT

Employee Signature_____Date_____

Supervisor Signature_____Date_____