

CLASSIFIED + ADMINISTRATIVE

Leave Reporting: Request for Exception – Requires Manual Entry

Name	Banner ID#
Department:	Extension:
Start Date:	End Date:
Total Hours:	Total Minutes:
Leave Type: (please check the appropriate leave type)
☐ Vacation ☐ Sick Leave ☐	☐ Floating Holiday ☐ Comp Time
Reason for Request: (please explain the reason that this was not reported thr	ough the Leave Report process in SSB)
Employee Signature	Date
Supervisor Signature	Date
Supervisor's Supervisor Signature	Date
President/Vice President/Designee Signat	Date
Associate Vice Chancellor, Human Resour	rces Signature Date