

HUMBOLDT STATE UNIVERSITY
**ABSENCE, EXCESS HOURS,
 HOLIDAY WORKED REPORT**

PAY PERIOD	<input type="checkbox"/> Qualifying	<input type="checkbox"/> Multiple	<input type="checkbox"/> REVISION	TIME BASE	FLSA	CB/ID
MONTH YEAR	<input type="checkbox"/> Non-Qualifying	Positions	(Replaces ALL previous reports for this pay period)	FT, IH OR	N E	
/	(see reverse)			time base fraction		

NAME (First)	(Middle Initial)	(Last)	EMPLOYEE ID NUMBER	POSITION NUMBER
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Absences With Pay:

Refer to instructions on reverse to complete this report

Working On A Holiday:

- SL01 Sick Leave Self
- SL02 Sick Leave Family
- SLBL ... Family Death ...Indicate Relationship _____
- FL01 Funeral Leave
- VA01 Vacation
- CT01 Using Overtime Credits
- HT01 Using Holiday Comp. Credits
- HC01 Using Holiday Credit
- HI01 Using Gov. Informal Holiday

- EH01 Using Excess Hours Credit
- PH01 Using Personal Holiday
- ML01 Short-term Military Leave In Days Attach Military Duty Orders
- EM01 Emergency Military Leave
- JD01 Jury Duty
- SW01 Subpoenaed Witness
- DISAB ... DO NOT POST TO ATT. REPORT
- UT01 Union Time (Check here if reimbursed)
- MP01 Maternity/Paternity/Adoption Leave

- HT06 Straight Time worked on a Holiday (employees covered by Bargaining Unit Contracts)
- HC05 Straight Time worked on a Holiday (MGMT ONLY)
- HT07 Premium Time worked on a Holiday for Credit
- P Premium Pay - Holiday Work (Do not post to Attendance Report, Form 672)

DO NOT ENTER OVERTIME WORKED ON THIS REPORT
 USE OVERTIME FORM PR-32

Irregular Work Schedule-Excess Hours Calculation
 (22 day pp = 176 hrs; 21 day pp = 168 hrs.)

176 hrs x _____ = _____ OR

168 hrs x _____ = _____

Actual Scheduled Hours = _____
 (from Irregular Work Schedule Below)

EH01 Excess Hours Used = - _____ OR

EH05 Excess Hours Earned = + _____

Absences Without Pay:

- DK01 ... Informal Leave Without Pay Granted (11 working days or less; qualifying pay period) (12-15 working days; non-qualifying pay period)
- DK01 ... Absence without leave (AWOL-Unapproved Absence)
- FM01 ... Family Medical LV w/out Pay
- FP01 Furlough Units

NOTE:
 FORMAL LEAVE OF 16 DAYS OR LONGER REQUIRES A FORMAL APPROVAL AND IS NOT REPORTED ON ABSENCE REPORT.

Include all dates in pay period - see State Pay Period Schedule. Employees working Irregular Work Week must indicate daily work schedule below.

Pay Period Dates	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Total Hours
Irregular Work Sched.																																
SL01																																SL01
SL02																																SL02
SL03																																SL03
FL01																																FL01
VA01																																VA01
CT01																																CT01
HT01																																HT01
HC01																																HC01
EH01																																EH01 -
EH05																																EH05 +
HI01																																HI01 (circle one)
PH01																																PH01
ML01																																ML01(circle one)
EM01																																EM01
JD01																																JD01 (circle one)
SW01																																SW01
DISAB LV																																
UT01																																UT01
HT06 straight time																																HT06
HC05 straight time																																HC05
HT07 prem. time																																HT07
DK01 Dock																																DK01
DK01 Dock																																DK01
AWOL																																AWOL
MP01																																MP01(circle one)
FM01																																FM01
FP01																																FP01

Reason for Absence: Medical Appointment Dental Appointment

I approve the use and/or earning of leave benefits as indicated above. I understand substantiation shall be required and attached for sick leave in accordance with current Bargaining Unit Contracts and/or CSU Policies.

PAYROLL USE ONLY

Reviewed _____

Keyed _____

Posted _____

To the best of my knowledge and belief, the facts stated are accurate and in full compliance with legal requirements. I understand substantiation shall be required for sick leave in accordance with current Bargaining Unit Contracts and/or CSU Policies.

 Supervisor Signature

 Employee's Signature

 Date

 Campus Phone

 Date

 Campus Phone

HUMBOLDT STATE UNIVERSITY INSTRUCTIONS FOR ABSENCE, EXCESS HOURS, AND HOLIDAY WORKED REPORT

GENERAL INSTRUCTIONS: INFORMATION REQUIRED ON THIS DOCUMENT IS IN ACCORDANCE WITH CURRENT BARGAINING UNIT CONTRACTS AND/OR CSU POLICIES. ABSENCE REPORTS ARE DUE IN THE PAYROLL OFFICE, SBS RM 327, ON OR BEFORE THE THIRD WORKING DAY OF THE NEXT PAY PERIOD. CONTACT YOUR DEPARTMENT ATTENDANCE CLERK IF YOU HAVE ANY QUESTIONS REGARDING YOUR LEAVE CREDITS. ALL OF THE FOLLOWING ITEMS ARE MANDATORY. INCOMPLETE FORMS WILL BE RETURNED.

All absences, excess hours, and holidays worked are reported on the Absence Report (PR54) for each pay period as follows: Multiple Positions: DIFFERENT SUPERVISORS-Submit a report for each supervisor. SAME SUPERVISOR-Submit one report and list positions and time bases where indicated. Intermittent Hourly: Submit separate Absence Report for each position.

Enter pay period (month and year); check qualifying (11 days or more of pay) or non-qualifying pay period (employee will NOT earn sick or vacation credits, or State Service credit [which affects Vacation Change Dates] for the pay period); indicate if employee has more than one position; check if this absence report is a revision to a previous report for the same pay period; circle time base (FT or IH) or enter time base fraction if less than full-time; circle FLSA Code & enter CBID number--see State Salary Schedule. Enter Name, Social Security Number, and complete position number(s). Absences with Pay: Check appropriate box, indicating type(s) of absence(s). Furnish all information requested in items requiring additional information. Funeral leave of one (1) day may be granted for travel of up to five hundred (500) miles round trip, or two (2) days for over five hundred (500) miles round trip to attend the funeral of a family member as outlined in Bargaining Unit Contracts and/or CSU policies. Attach Military Duty orders if applicable. Absences Without Pay (Dock): Complete boxes, indicating type of unpaid absence. Note: If the employee is absent without pay for more than eleven (11) consecutive working days which fall between two (2) consecutive otherwise qualifying pay periods, one (1) pay period shall be non-qualifying.

SPECIFIC LINE INSTRUCTIONS:

Pay Period Dates: The blank columns before "1" and after "31" should be used when a pay period includes dates from another month.

Irregular Work Schedule: ALL employees (excluding Intermittent Hourly and Academic Year) working Irregular Schedules (Flex) must indicate actual hours scheduled to work during the pay period on this line and submit a report for each pay period. A difference between the total hours in the schedule and the number of hours in the pay period will give a positive or negative net result for the pay period. See examples below showing how to calculate Excess Hours. Determine if the pay period is a 22-day (176 hours) or 21-day (168 hours) pay period and use the appropriate line. Enter employee's time base & multiply number of hours by time base to determine number of hours for which the employee is paid for the pay period. Difference between that calculation and the number of hours entered on the "Irregular Work Schedule" line determines if the employee has worked more or less hours (Excess Hours) than paid for the pay period. That number is then transferred to the proper Total Hours column (either EH01 or EH05).

Irregular Work Schedule-Excess Hours Calculation
(22 day pp = 176 hrs; 21 day pp = 168 hrs.)

176 hrs x _____ = _____ OR
(time base)

168 hrs x 1.00 = 168.00
(time base)

Actual Scheduled Hours = 167.50
(from Irregular Work Schedule Below)

EH01 Excess Hours Used = - 0.50 OR
 EH05 Excess Hours Earned = + _____

Irregular Work Schedule-Excess Hours Calculation
(22 day pp = 176 hrs; 21 day pp = 168 hrs.)

176 hrs x _____ = _____ OR
(time base)

168 hrs x 1.60 = 105.60
(time base)

Actual Scheduled Hours = 107.50
(from Irregular Work Schedule Below)

EH01 Excess Hours Used = - _____ OR
 EH05 Excess Hours Earned = + 1.90

Include all dates in pay period - see State Pay Period Schedule. Employees working Irregular Work Week must indicate daily work schedule below.

Pay Period Dates	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	MHR	Total Hours		
Irregular Work Sched.	7.5	7.5	7.5			8.75	8.75	7.5	7.5	7.5			8.75	8.75	7.5	7.5	7.5			8.75	8.75	7.5	7.5	7.5			8.75	8.75					7.5	167.50	
EH01																																			EH01 - 0.50
EH05	/																																EH05+		
Irregular Work Sched.	X	4.5	7				5.5	7	4.5	7				5.5	7	4.5	7				5.5	7	4.5	7				5.5	7	4.5	7				107.50
EH01																																			EH01-
EH05	/																																EH05+1.90		

SL01, SL02, SL03, FL01, VA01, CT01, HT01, HC01, HI01, FM01: Enter the actual number of hours the employee used each day. Family Medical Leave without pay (FM01) requires approval by appropriate administrator or person designated by the President. Refer to current Bargaining Unit Contracts, CSU policies and Human Resources Office for further details. Exception: Exempt Employees (FLSA "E") must report absences in full days (pro-rata for part-time employees). Partial day absences may only be reported if the exempt employee is on an irregular schedule, in which case the employee must report no less than the number of hours scheduled to work on that day.

EH01: Total negative hours determined from the Irregular Work Schedule calculated above are to be entered in the total column only; however, if the employee has a positive balance from prior months, those hours may be used by entering usage on the appropriate date(s) and entering totals in the total column.

EH05: Total positive hours determined from the Irregular Work Schedule calculated above are to be entered in the total column only.

PH01: Personal Holiday must be used in full day increments. When transferring total usage to the Attendance Report, enter "1.00" unit.

MP01, ML01, EM01: MUST be reported in DAYS, not in hours.

JD01, SW01: Employee must send original and one copy of the Absence Report (front & back) and Jury Duty Confirmation or Subpoena Order from Court, along with any fees which may have been received. If employee chooses to keep the fees, leave credits must be used to cover the hours on jury duty. Employee may keep travel allowance.

DISAB LV: If Disability approved after original absence report submitted, Revised Absence Report is required. Report ALL usages indicating Disability Category as follows:

N = Non-Industrial Disability Leave, I = Industrial Disability Leave, IS = Industrial Disability Leave with Supplementation, ICS = CSU IDL Sick Leave Supplementation Program, EI = Enhanced Industrial Disability Leave (R08 employees only), TP = Temporary Disability with Partial Supplementation, TF = Temporary Disability with Full Supplementation, TN = Temporary Disability with no Supplementation. Employees on Irregular Work Schedules are returned to a Regular Work Schedule for the duration of their disability pay.

UT01: If reimbursable, enter a checkmark in the guidelines on the reverse and send a copy of Absence Report to Fiscal Affairs, SBS Rm 345.

HT06, HC05: Straight time holiday worked for credit only (not eligible for pay). Use HT06 for non-exempt employees, HC05 for exempt. Employees on flexible schedules must show HT06 for their time base hours for holidays on which they were not scheduled to work (see Attendance Clerk for Payroll Informational Memo #2 dated 2-12-93).

HT07: Premium time holiday worked. Use HT07 if the employee requests premium time on the books. Use the symbol "P" if the employee is to be paid; do not post paid time to the Attendance Report.

DK01: Informal Leave Without Pay and/or AWOL hours must be FAXED to the Payroll Office by the 15th of the month to ensure correct pay for the employee; after the 15th FAX on a daily basis. Formal leave without pay (16 days or more) must not be posted to the absence report. Contact the Human Resources Office for guidelines regarding AWOL absences. Reason for Absence: Must indicate reason for sick leave absences (including relationship of family member when reporting family sick leave), or unusual circumstances.

Employee's signature and date signed. Employees have the responsibility to give their supervisor advance notification when they anticipate a future absence. When unanticipated emergency causes the absence, the employees are responsible for notifying supervisor as soon as possible and keeping their supervisor informed as to the possible date of return. Employees are also responsible for promptly reviewing and signing their absence report(s) at the end of the pay period and submitting to supervisor. If the employee is unavailable, enter "Employee not available" on this line and submit by due date, followed up with an original signature when obtained on a copy of the absence report.

Supervisor's approval, signature and date required. Supervisors are responsible for ensuring that employees comply with the regulations governing absence from work prior to approving and signing the employee's absence report. Methods of verification can include telephone, physician statement, home or hospital visit. If the absences are not approved, contact the Human Resources Office for guidelines to report the absences.