Human Resources Department
**Monthly Absence Report**

|  |  |  |
| --- | --- | --- |
| **Department:**       | **Month:**  | **Year:**  |
| **Instructions:**1. Complete this form for all employees in SEIU & AUPAT.
2. Submit to Human Resources no later than five working days following the end of each month.
3. If no absence or relevant data is pertinent for each category, enter NIL.
4. Sick leave and vacation are to be reported as dates with number of days (or portions of days) used.
5. Overtime is to be reported as number of hours used.
6. Each employee is to initial next to his or her own submission
 |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Employee** | **Dates of Sick Leave** | **Dates of Vacation** | **Dates of Overtime** | **Other (specify)** | **Employee Initials** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

**Authorization:**

|  |  |
| --- | --- |
| **Signature of Director/Department Head** |  |
| **Date Submitted:** |  |