

# EXEMPT STAFF MANUAL LEAVE REPORTING SUBMISSION FORM

This Submission Form is for reporting corrections for a closed leave period in Employee Self Service. Enter the original and corrected leave time, where necessary, and an explanation for the change in the space(s) provided below. If additional lines are needed, submit multiple forms.

If you are correcting leave codes, hours reported or dates reported, use the Original Time and Corrected Time sections.

If you are adding leave time not previously submitted, use the Corrected Time section only.

Submit the completed form to [payroll@iwu.edu](mailto:payroll@iwu.edu).

## Original Time Reported:

Leave Period Start Date: \_\_\_\_\_ Leave Period End Date: \_\_\_\_\_

Date	Leave Code	Hours
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

## Corrected Time:

Date	Leave Code	Hours
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Explanation: \_\_\_\_\_

By signing below, I certify that the corrections entered above represents a true and accurate record of my leave time.

Employee: \_\_\_\_\_

Date: \_\_\_\_\_

Approver: \_\_\_\_\_

Date: \_\_\_\_\_

Vice President\*: \_\_\_\_\_

Date: \_\_\_\_\_

\*Vice President approval may be required by the Business Office. Business Office will route the form to Vice President when applicable.