

<b>MONTH</b>

Name:			University ID:		
ORG-DEPT:	BLDG:	ROOM:	CLSF:		

Date	Hours	Code	Hours	Code	Hours	Code	Hours	Code	Date	Hours	Code	Hours	Code	Hours	Code	Hours	Code
1									17								
2									18								
3									19								
4									20								
5									21								
6									22								
7									23								
8									24								
9									25								
10									26								
11									27								
12									28								
13									29								
14									30								
15									31								
16																	

**Paid Leave Codes:**

- 2 Sick Leave - Regular
- 3 Sick Leave - Family Caregiving
- 4 Sick Leave - Funeral
- 5 Sick Leave - Pallbearer
- 6 Sick Leave - On-the-Job Injury
- 7 Sick Leave - Adoption
- 10 Jury Duty
- 11 Military Leave
- 12 Bone Marrow Donor
- 13 FMLA Bone Marrow Donor
- 14 Vascular Organ Donor
- 17 FMLA Vascular Organ Donor
- 52 FMLA Sick Leave - Regular
- 53 FMLA Sick Leave - Family Caregiving
- 56 FMLA Workers Comp - Sick
- 57 FMLA Sick Leave – Adoption
- 63 FMLA FCL Sick – Military Family Caregiving

I would like my Sick Leave transferred to Vacation:

- This Month Only
- Every Month Possible
- Cancel my election to transfer Sick Leave to Vacation.

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Employee Signature