



Leave Reporting: Employee Absence Report

Name _____	Banner ID# _____
Department: _____	Extension: _____
Start Date: _____	End Date: _____
Total Hours: _____	Total Minutes: _____

Reason for Absence: *(please check the appropriate leave type)*

_____ **Jury Duty** *(verification from Courthouse attached)*

_____ **Conference Attendance** *(attendance verification from conference attached)*

_____ **Bereavement** *(relationship & location required for processing)*

Relationship: _____

Location: _____

_____ **Military Leave** *(verification documents attached)*

_____ **Industrial Illness** *(verification documents attached)*

_____ **Unpaid**

Reason: _____

_____ **Other**

Reason: _____

Employee Signature

Date

Supervisor Signature

Date