

Monthly Leave Correction Request and/or Sick Leave Conversion-to-Vacation Request

Iowa State University of Science and Technology

Last Name _____ First Name _____ Initial _____

Employee University ID # _____ Date _____

Leave Balance Correction:

	Accrual Adjustment + or -	Usage Adjustment + or -	Corrected Balance as of: _____
<div style="display: flex; align-items: center;"> <div style="border-left: 1px solid black; border-right: 1px solid black; border-bottom: 1px solid black; padding: 5px; margin-right: 5px;"> Check Item to be Updated or Corrected </div> <div style="flex-grow: 1;"> <input type="checkbox"/> Regular Vacation <input type="checkbox"/> Converted Vacation <input type="checkbox"/> Sick Leave <div style="margin-left: 20px;"> <input type="checkbox"/> Regular Sick Leave <input type="checkbox"/> Emergency Sick Leave <input type="checkbox"/> Funeral/Pallbearer </div> <input type="checkbox"/> Emergency Leave taken year to date <input type="checkbox"/> Compensatory Time </div> </div>	_____ _____ _____ _____ _____ _____ _____	_____ _____ _____ _____ _____ _____ _____	_____ _____ _____ _____ _____ _____ _____

Explanation for Correction:

1. Originally reported _____ hours of _____ usage for _____ should have been _____ hours
2. Originally reported _____ hours of _____ usage for _____ should have been _____ hours

Comments: _____

Sick Leave Conversion:

Month to Begin

- Employee authorizes to automatically convert sick leave for vacation each month eligible
- Employee wishes to terminate original election to automatically convert sick leave for vacation

Employee must initial this request to convert or terminate sick leave to vacation _____

Submit to:
Payroll Office, 1560 ASB
or fax to 294-6470

Departmental Signature

Contact phone number _____