

Trinity College Monthly Leave Report

Name :
(please print)

Dept.:

Month Reporting (please circle the appropriate month):

Jan. Feb. Mar. Apr. May June July Aug. Sept. Oct. Nov. Dec.

Code	Type of Leave	Hours Used	Dates of Leave
4	General Leave		
5	Major Medical Leave ♦ ♦		
9	Holiday		
10	Administrative		
11	Liberal/Weather		
13	Jury Duty ♦		
	Leave w/o Pay ♦		

♦ Documentation notice must be attached

♦♦ Major medical leave cannot be used for routine sick days, which are now covered under general leave, but rather, this leave bank is intended for use in the event of a major medical event (e.g., FMLA, major or catastrophic illness and similar family medical needs). In order to use this form of medical leave, staff must notify the Director of Human Resources who will provide additional directions regarding documentation and approval for use of major medical leave.

Employee Signature: _____

Date:

____/____/____

Name of Supervisor: _____

Date:

____/____/____

Supervisors Signature: _____

Please return leave report to the Payroll Office by the 15th of each month. The leave report needs to be signed by a Supervisor prior to submitting the report to Payroll.

Payroll Office Use Only