



MONTHLY ABSENCE REPORT

It is the responsibility of each employee to complete and submit to payroll one report for each month, any days away from work. Some leave types require additional documentation. To request/report these leaves, contact Human Resources immediately. Consult the MSC Handbook or the BCEA Collective Bargaining Agreement for specific leave criteria.

Management/Supervisory/Confidential

Employee Name (Last, First): _____ **CID:** _____ **MONTH:** _____

TYPE OF ABSENCE	DESCRIPTION	DATES ABSENT	TOTAL # HRS
Vacation	15.34 hours per month – 400 hrs maximum accrual		
Sick Leave	8 hrs per mo, prorated for < 100% or 10,11,12 mo		
Bereavement Relationship: _____	3-5 days not from sick leave – no accrual In state 3 days, Out-of-state (or 400 mi), Executor 5 days		
Critical Family	3 days per yr with pay not from sick leave – no accrual. Must have HR approval		
Jury Duty/Court	Must attach Summons		
Personal Business	8 hrs per yr not from sick leave (on approval) - no accrual		
Personal Necessity/Emergency	48 hrs per yr from sick leave – no accrual		
Other:	All other leaves must be pre-approved by Human Resources and will be reported accordingly.		

Full Time Faculty

Employee Name (Last, First): _____ **CID:** _____ **MONTH:** _____

TYPE OF ABSENCE	DESCRIPTION	DATES ABSENT	TOTAL # HRS
Sick Leave	10 month: 10 days/80hr, 11 month: 11days/88 hrs, 12 month: 12 days/96 hrs		
Bereavement Relationship: _____	3-5 days not from sick leave – no accrual In state 3 days, Out-of-state (or 400 Mi), Executor 5 days		
Jury Duty/Court	Must attach Summons		
Personal Leave	7 days per year from sick leave – no accrual		
Personal Emergency Leave	Additional 6 days per yr from sick leave		
Other:	All other leaves must be pre-approved by Human Resources and will be reported accordingly.		

Employee’s Signature: _____ Date: _____

Supervisor’s Signature: _____ Date: _____

Please retain a copy and Submit Original to Payroll by the 5th of the following month reported