

OVERTIME EXEMPT LEAVE REPORT

FACULTY AND ADMINISTRATIVE PROFESSIONAL STAFF

Human Resource Services
 Washington State University
 Pullman, WA 99164-1014

WSU ID NUMBER		NAME <i>LAST, FIRST, MIDDLE INITIAL</i>										<input type="checkbox"/> Faculty <input type="checkbox"/> Admin Professional		TITLE CODE	
MONTH	YEAR	EMPLOYING DEPARTMENT					MAIL CODE					<input type="checkbox"/> Annual <input type="checkbox"/> Academic <input type="checkbox"/> Summer		PERCENT FTE	

Leave Hours Taken	Total Hours	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
Annual Leave																																
Sick Leave																																
Leave w/o Pay																																
Personal Holiday																																
Holiday																																
Emergency Leave																																
Training Leave																																
Civil Leave																																
Military Leave																																
Shared Leave																																
Leave With Pay																																

Balances	Annual Leave *	Sick Leave	Shared Leave	Comments
Previous Balances				
Subtract Hours Used				
Subtract Donated Hours			X	
Add Hours Earned or Shared Leave Received				I certify that this is an accurate report of my leave hours. Employee's Signature <div style="text-align: right;">X</div>
Current Balance				Supervisor's Signature
Administrative Correction				Administrative Approval <div style="text-align: right;">X</div>

* The maximum annual leave balance is 352 hours or 44 days.