University of Dallas

Leave Form

PLEASE SUBMIT COMPLETED FORMS TO THE PAYROLL OFFICE

Employee: _____ UD ID#: _____

Payroll: ☐ Exempt (Salaried) ☐ Non-Exempt (Hourly)

Leave Dates:

_____ to _____ for a total of _____ hours.
Start Date End Date

What type of leave is being requested?

☐ Vacation

☐ Sick

☐ Bereavement (Please attach appropriate documentation to this form.)

Relationship of the deceased to the employee: _____

☐ Jury Duty (Please attach appropriate documentation to this form.)

☐ Unpaid Leave (please explain on line, below)

☐ Other (please explain on line, below)

_____

_____

_____ _____ _____
Employee Signature Department Date

_____ _____
Supervisor's Approval Date

NOTE: All leave must be taken in accordance with university policy as stated in the Employee Handbook. It is the responsibility of the employee to request vacation leave in advance of the dates requested. It is the responsibility of the supervisor to ensure the approved leave form is submitted to Payroll for recording.