Monthly Exception Reporting Change Form

Use one form per employee, per period being adjusted.

Click here to email completed form to MNTIMECHG@SLU.EDU.

Place "X" In ONE Field Below for Type of Adjustment:		Pay Period Being Adjusted:		
Holiday Hours Worked (worked holiday and banking for later use) Change Originally Submitted Leave Report ** New Employee or New Job with No Leave Report Available Not Started or Submitted Leave Report		MN	Calendar Year Being Corrected Leave Period ID Being Corrected Leave Period Begin Date (select from drop down)	
Employee Name:		Banner ID:		
Position #:				
Banner Org (Dept) #:		Org Name:		

Instructions below are based on the type of correction which was selected above:

► "Holiday Hours Worked" must be reported immediately after the pay period ends. If the employee attempts to use banked Holiday before it is reported on the change form, the system will reduce the employee's vacation hours. If the employee is using the banked holiday hours during the same month in which the holiday occurred, do not report the hours on this change form, simply instruct the employee to add a comment to their Leave Report indicating that the holiday hours worked were used during the same pay period. To report banked holiday hours, complete the "Corrected or Not Reported Leave Hours" column below.

▶ "Change Originally Submitted Leave Report" adjustments require that each original total absence by Earnings Code, even if it will not be changed/corrected, be entered in the "Hours Originally Reported on Leave Report" column. The "Corrected, Same, or Not Reported Leave Hours" column should be completed with the total hours the employee should have originally reported, by earning code, and indicates to Payroll (in the "Net Adjustment") column the hours to be adjusted for each earnings code. The "Net Adjustment" will be a zero if the original hours reported and the corrected hours reported are the same.

► "New Employee or New Job with No Leave Report Available" or "Not Started or Submitted Leave Report" changes require the completion of only the "Corrected, Same, or Not Reported Leave Hours" column below.

Each Department is responsible for retaining a copy of this correction form, and appropriate backup, for 4 calendar years. Appropriate backup includes the details involved in the change being made below. Change/Addition Forms received by Payroll Services by the 20th of the current month will be processed on the upcoming payroll cycle, forms received after that point will not be processed until the following month.

Earnings Code	**Originally Rep on Leave Rep	orted No	prrected, Same, or ot Reported Leave Hours	Net Adjustment
Holiday Worked/Accrued				0.00
Holiday-Use Banked Time				0.00
Unpaid				0.00
Vacation				0.00
Sick				0.00
Sick-Caregiver Leave (not FMLA)				0.00
FMLA Vacation				0.00
FMLA Sick				0.00
FMLA Sick-Caregiver				0.00
FMLA Unpaid				0.00
				0.00
				0.00
for Month:	C	0.00	0.00	0.00

Explanation/Additional Information (if needed):

I have first hand knowledge of the activity described in this report. I certify that it is an accurate reporting of the work performed as reported on leave reports maintained in this department, and is an accurate correction of the prior leave submission.

This correction form will ONLY be accepted via email and from the email account of the designated Time Approver or, in their absence, their PROXY,

Designated Time Approver's Name: ______ Banner ID #: _____