**Leaves**

**Campus Shared Services**

Notify HR Center that an employee is going out on leave (FMLA, pregnancy, disability, etc.). Blue fields are required.

**Section 1: Basic Info**

Name: Click here to enter text. Date: Click here to enter text.

Department Name: Click here to enter text.

**Section 2: Leave Info**

|  |  |  |  |
| --- | --- | --- | --- |
| Requesting Department | Click here to enter text. | Employee Name (Last, First) | Click here to enter text. |
| Effective Date | Click here to enter a date. | Expected Return Date | Click here to enter a date. |
| Employee ID | Click here to enter text. | Person Level or Job Level (type of leave) | Click here to enter text. |
| Supervisor | Click here to enter text. | Paid/ Unpaid | Choose an item. |
| **Reason For Leave**  Click here to enter text. | | | |
| **Comments**  Click here to enter text. | | | |