MONTHLY ATTENDANCE REPORT

CALIFORNIA STATE UNIVERSITY, FRESNO AUXILIARY SERVICES

	☐ Athletic Corporation			☐ Bulldog Foundation				☐ Ag Foundation	
	(Please Print)								
tendance Report for the Month of:					Y	'ear: 20	☐ Exempt	☐ Non-Exempt	
CODES TO USE WHEN TIME OFF IS TAKE S) Sick Leave Self (H) Holiday SF) Sick Leave Family (J) Jury Duty/Witness (V) Vacation (B) Bereavement					(PL) Parent Leave (C) Work Related Injury or Illness (D) Disability (Not Work related)		(U) Unapproved Absence (Unpaid) (L) Approved Leave (Unpaid) (W) Worked on Holiday		
Hours Worked						Time Off Used		sed	
Date Tim	ne In	Time Out	Time In	Time Out	# of Hours Worked	# of Hours Off	Reason Code	Explanation	
1									
3									
4									
5									
6									
7									
9									
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25									
26									
27									
28									
30									
31									
otal Hours: (S) (V) Un					aidOver Base		Overtime		
						DESCRIBED IN			
					_ Date				
upervisor Signature							Unnut	Dato	

Your Monthly Attendance Report is due to Auxiliary Human Resources & Payroll <u>five</u> days after the end of the month. If your supervisor is unavailable for signature, please submit a copy and forward the signed original as soon as possible. Please see additional detailed instructions on back of form.

INSTRUCTIONS FOR COMPLETING FORM

1. Complete form according to your classification: Salaried Non-Exempt or Exempt.

Non-Exempt employees: List hours worked, lunch in/out AND all absences.

<u>Exempt employees:</u> List <u>only</u> full-day absences.

*If none, check Exempt Employee box at the bottom of the page.

TIME OFF CODES AND EXPLANATIONS

The following descriptions will assist you in using these benefits and understanding eligibility when time off is needed. If you have any questions or need clarification, please contact Auxiliary Human Resources for advice and assistance. Please do not consult with an employee of the University as they may give you information that relates to their employment policies and benefits and not those of the Auxiliary corporations.

SICK LEAVE (S) is used for your own illness or medical appointments. Your sick leave credits will be used when you are on disability, work related illness or injury, pregnancy disability, CFRA and FMLA related matters.

SICK LEAVE FAMILY (SF) may be used for short illnesses or medical appointments for your child, spouse or parent. It may also be used for serious long-term illnesses lasting more than three days while eligible for FMLA or CFRA. Sick leave for family purposes is used from your accrued sick leave credits. Up to half of your accrued sick time per year may be used to care for a sick family member to include: child, parent, spouse, or domestic partner.

Please note: To be eligible, you must list the family member under explanation on the front of this form.

BEREAVEMENT LEAVE (B) is for the death/funeral of a family member, please see the Employee Handbook for circumstances that are covered under this leave.

VACATION (V) may be used when your supervisor has granted prior approval. It may also be used when you no longer have sick leave credits while on disability, workers' compensation, FMLA, CFRA or pregnancy disability leave.

MILITARY LEAVE time is deducted from vacation.

PARENT LEAVE (PL) is for visits to your child's school for conferences with school personnel or to attend a school function during the school day. Vacation time can be used.

JURY DUTY (J) is paid up to a certain number of days per year. Vacation may be used if additional time is required. To be eligible, all notices of served jury duty and information regarding any payments (other than meals or mileage) must be submitted to the payroll department.

LEAVE OF ABSENCE INFORMATION

Employees may be entitled to certain leaves established by federal and state laws. These leaves include Pregnancy Disability Leave (PDL), California Family Rights Act (CFRA), Federal Family Medical Leave ACT (FMLA), and Military. To be eligible, certification by a medical provider or military authority is required. Contact Auxiliary Human Resources to determine eligibility and obtain necessary forms.

2. Submit form to supervisor for approval, then forward to Auxiliary Human Resources & Payroll within five (5) days of the end of the month.