

UNIVERSITY OF MINNESOTA

Absence Card

You may type directly into this form

Employee Name Employee ID Adjustment

Dates Absent click arrow for calendar	Number of Hours					Reason (optional)
	Sick Leave	CS/BU Vacation	Leave w/o Salary	Personal Holiday	Comp Time	

If using sick leave, know your rights and obligations under FMLA. Refer to <http://www.umn.edu/ohr/policies/leaves/fmla>

Employee Signature

X

Date

Phone

Supervisor Signature

X

Date

Phone