AMSS Exception Reporting

Prior Pay Period Time/Leave Adjustment Form

I. Select Adjustment Type								
ADD OMITTED TIM	E/LEAVE USAG	E COF	RRECT REP	ORTED	TIME/LEAVE USAG	E ODELETE F	REPORTED TIME/LE	AVE USAGE
Report usage that car					e usage that was enter		e worked/leave usage t error for a prior pay pe	
service (time that is b II. EMPLOYEE INFORMATIO			orrectly for a	рпог рау	perioa.	enteream	епогога рпограу ре	nou.
							Pay Period	Pay Period
Employee Name		Empl ID		Rec#	Depa	artment	Month	Year
III. LEAVE USAGE OR EARNE	ED	** /	Absence Ty _l	pes with	n an asterisk require	the relationship	to be listed in explo	ınation field
Absence Type	Begin D	ate	End Date		Total Hours	Brief explanation of adjustment (required)		
IV. TIME WORKED FOR PAY								
Time Reporting Code	Begin D	ate	End Date		Total Hours	Brief explanation of adjustment (required)		
V. CERTIFICATION and AUT	THORIZATION							
I certify that the information o	n this form are	accurate and	d in complic	ance wit	th legal requiremen	its.		
Employee Signature			Date					
Reviewer Signature (Optiona	al)		 Date					
neviewer signature (options	41)		Date					
Authorized Approver in AMSS Signature (Required)				Authorized Approver Printed Name Date				

Authorized Approver Printed Name