



# MANUAL LEAVE ADJUSTMENT FORM - ALL EMPLOYEES

Employee Name: \_\_\_\_\_ Date: \_\_\_\_\_ Phone No: \_\_\_\_\_  
 Banner/Tech ID:   R    
 ORG/Dept Name/No.: \_\_\_\_\_ Preparer's Name: \_\_\_\_\_

*MAKE COPY FOR YOUR FILES PRIOR TO SUBMITTING TO PAYROLL SERVICES*

**Use this Box if Payroll needs to deduct hours not submitted**

Reporting Month	Date	Leave Code	Hours Taken

The completed and signed form should be delivered to: Scan & Email: [webmaster.payroll@ttu.edu](mailto:webmaster.payroll@ttu.edu) OR  
 Fax: 80-742-1589 OR  
 Mail Stop MS 1092  
 Comments:

**Use this Box if employee entered hours on wrong Earn code or wrong amount**

Reporting Month	Date	Leave Code Used	Leave Code need to use	Hours Taken	Hours need to take

	Codes	Types of Leave	Codes
Assistance Dog Training	ADG	Military Emergency LV	MELV
Blood Donor	DBX	Organ Donor	ORL
Bone Marrow Transplant	BMT	Educational Activities	PTC/PTX
Emergency Leave	EMG	Red Cross	RDC
Firefighter EMS	FFX	Sick Leave	SCK
Foster Parent	FPX	Sick Leave Exception	SLE
Funeral	FNX	Sick Leave Pool	SLP
HSC Holiday Comp (HSC ONLY)	HCP	SVC. Excellence Award	SEL
Holiday	HOL	Vacation	VAC
Jury Duty	JDX	Voting	VOX
Military Leave	MIL	Reserve Law Offcr LV	RLT/RLX

Approver Signature: \_\_\_\_\_

Employee Signature: \_\_\_\_\_