

## **Leave Balance Adjustment Form**

## **Human Resources Office, Whitehall Township**

This form is to be completed when leave was incorrectly reported for an employee on a time card for dates in which the payroll has already been processed. Submission of the form to Human Resources will result in the employee's leave balance being corrected. The form should be submitted to Human Resources as promptly as possible to ensure leave balances are maintained accurately for each employee.

Date Created:			
Employee Information			
Employee Name:			
Employee ID:			
Job Title:			
Department:			
Leave Adjustment Information			
Туре	Adjust (+ or -)	Hours	Reason for Adjustment  Please explain in what pay period the error(s) occurred, how it should be corrected, and attach supporting documentation.
Vacation			
Accum/ Comp			
Birthday			
Personal			
Sick			
Employee Sig	nature:		
Supervisor Si	gnature:		
Human Resou	ırces Approval:		
Date of Correction:/ Updated Balance Hours:VacPersAccum/CompSick			
cc. Employee, P	ersonnel File - Pay	vroll	Birthday