

SCHENECTADY CITY SCHOOL DISTRICT

Employee Absence Change Form

This form is to be used when an employee believes the records of the School District incorrectly reflect the amount of time taken or the reason, whether due to the employee's error or the District's error. Additional document may be requested to support a change in the District's official records.

Previous Reported Absence			Requested Correction in Recording	
Absence Date	Amount of Time (i.e. A.M., P.M., ½ day or whole day)	Reason	Amount of Time (i.e. A.M., P.M., ½ day or whole day)	Reason

Please complete the following:

Employee Name: (Print) _____

Employee Signature: _____ Date: _____

Building: _____

Supervisor Name: _____

Supervisor Signature: _____

Forward completed form to Business Office - Mont Pleasant – 108 Education Drive

☐ Additional information required: _____

Business Office Review: _____

☐ Approved Signature

Date

☐ Disapproved Reason: _____

Payroll change effective on : _____