



# School of UNDERGRADUATE STUDIES

## Manual Timesheet Adjustment Form

NAME	
UT EID	

TYPE OF LEAVE	
NUMBER OF HOURS	
DELETE/ADD TIME?	
FLOATING HOLIDAY?	

REASON FOR ADJUSTMENT

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Departmental Approval (with Signature Authority)

\_\_\_\_\_  
Date

FOR HR USE ONLY

\_\_\_\_ Approved \_\_\_\_ Denied

\_\_\_\_\_  
HR Representative Signature

\_\_\_\_\_  
Date