**CHASS Exception to Approved Employment Dates Request**

**Temps and Student Workers**

**Please complete the form. All sections are required. The Department Head or Unit Leader must sign at the bottom of the form indicating their approval. The completed form should be sent to appropriate HR Consultant.**

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| **Employee and Job Information** | | | |
| **First Name** | Enter first name | **Department** | Select department from dropdown |
| **Last Name** | Enter last name | **Employee ID #** | Enter ID # if current or former employee |
| **Position Type** | Select position type from dropdown | **Salary** | Hourly Rate |
| **Dates of Work** | Start Date – End Date | **Supervisor** | Enter Name of Supervisor |
| **Missed Punch Log Attached?  Yes  No** | | | |

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| **Description of Work:** |
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| **Explanation of Circumstances (Why was the employee allowed to work outside of the approved start and end dates?)** |
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| **How will this be prevented in the future?** |
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| Department Head or Unit Leader Signature |  | Date |  |