

LOS ANGELES COMMUNITY COLLEGES

PAYROLL SERVICES 770 WILSHIRE BOULEVARD, 5TH FLOOR LOS ANGELES, CA 90017

SALARIED EMPLOYEE ABSENCE CERTIFICATION / REQUEST

Use separate form for each absence period and reason for absence. Do not combine multiple reasons on one form.

Last N	ame		First Name		Middle Name		Employee ID Number
Servi	ce:	Academic	Classified				
1. A	BSEN	CE PERIOD: Da	ates:		Full Days:	Part of Day:	☐ AM ☐ AM
			From To	0	Numbe	From	_ PM PM To
		Fa	aculty Unit Only: For Pa	art of Day Absen	ce Identify Hours of S	Scheduled Duties Per Da	ay (Including Office Hours):
2. R	EASO	N:					
Α	A. ABSENCE CERTIFICATION: I certify I was absent from my duty during the absence period indicated in Section 1 was due to						
		Not the resu	: Indicate nature of illr It of an Industrial Accidustrial Accidustrial Accident that o	dent	Absences oveAbsences oveEmployment e		an Certification ormal Leave of Absence Ilness/injury absence prohibited.
		(Month/Day/\	Year)		I certify the abov		le to perform his or her duties
		Personal Neces 1. Death	ssity: Indicate Reaso of member of immedia				
		2. Accide	ent involving my persorent involving: a. My	٦.		ed Physician/Other Practition	
		8. Immine	f child – father. ent danger to my home llowing significant ever				
		9. The fo	nowing significant ever	nt wnich requi	ed my attention du	ıring my regular assig	ned working hours:
			nowing significant even	nt which requi	ed my attention du	ıring my regular assig	ned working hours:
			nowing significant ever	nt wnich requi	ed my attention du		te Travel Required? No
		Reason				Out of Sta	te Travel Required? No
В	□ 3. <u>A</u> B	Reason Bereavement	Relationship		ate of Death (Month/I	Out of Sta	te Travel Required? No
В		Reason Bereavement SENCE REQUEST: Annual Physica Casual Absence Compensatory Jury Duty Non-Duty Time Personal Absence Unpaid	Relationship I request to be absent I Exam – Requires sup e	from my posit pplemental Ph	ate of Death (Month/I on during the abse ysician's Certificati	Out of Sta Day/Year) ence period indicated	te Travel Required? No
В		Reason Bereavement SENCE REQUEST: Annual Physica Casual Absence Compensatory Jury Duty Non-Duty Time Personal Absen Unpaid Vacation	Relationship I request to be absent I Exam – Requires supe Time Taken ("D" & "G" Basis Quonce Leave (PAL Day) -	from my posit pplemental Ph ta) Unit 1 Employ	nte of Death (Month/I on during the abse vsician's Certification	Out of Sta Day/Year) ence period indicated on form.	te Travel Required? No
В		Reason Bereavement SENCE REQUEST: Annual Physica Casual Absence Compensatory Jury Duty Non-Duty Time Personal Absence Unpaid	Relationship I request to be absent I Exam – Requires supe Time Taken ("D" & "G" Basis Quo	from my posit pplemental Ph ta) Unit 1 Employ	ate of Death (Month/I on during the abse ysician's Certificati	Out of Sta	te Travel Required? No Yes
		Reason Bereavement SENCE REQUEST: Annual Physica Casual Absence Compensatory Jury Duty Non-Duty Time Personal Absen Unpaid Vacation Work Related:	Relationship I request to be absent I Exam – Requires sure Time Taken ("D" & "G" Basis Quonce Leave (PAL Day) -	from my positoplemental Photal ta) Unit 1 Employ	ate of Death (Month/I ion during the abso vsician's Certificati vees Only on Release Time	Out of Stanoay/Year) ence period indicated on form. Other:	te Travel Required? No Yes
c		Reason Bereavement SENCE REQUEST: Annual Physica Casual Absence Compensatory Jury Duty Non-Duty Time Personal Absen Unpaid Vacation Work Related:	Relationship I request to be absent I Exam – Requires supe Time Taken ("D" & "G" Basis Quonce Leave (PAL Day) -	from my positoplemental Photal ta) Unit 1 Employ	ate of Death (Month/I ion during the abso vsician's Certificati vees Only on Release Time	Out of Sta	te Travel Required? No Yes
C		Reason Bereavement SENCE REQUEST: Annual Physica Casual Absence Compensatory Jury Duty Non-Duty Time Personal Absen Unpaid Vacation Work Related:	Relationship I request to be absent I Exam – Requires sure Time Taken ("D" & "G" Basis Quonce Leave (PAL Day) -	from my positoplemental Photal ta) Unit 1 Employ	ate of Death (Month/I ion during the abso vsician's Certificati vees Only on Release Time	Out of Stanoay/Year) ence period indicated on form. Other:	te Travel Required? No Yes