

EE# _____

City of Madison
LEAVE ADJUSTMENTS

Employee: _____

Department: _____

Date: _____

Vacation Change	A change in vacation balance is requested for the following reason:	
	1. _____ Completion of probation	Date of hire: _____
	2. _____ Error in reporting	
	3. _____ Other (explain)	

	Error in reporting on payroll # _____ :	was reported as _____
		should be reported as _____
		ADJUSTMENT _____

Sick Leave	A change in sick leave balance is requested for the following reason:	
	Error in reporting on payroll # _____ :	was reported as _____
		should be reported as _____
		ADJUSTMENT _____

Comp Time	A change in comp time is requested for the following reason:	
	Error in reporting on payroll # _____ :	was reported as _____
		should be reported as _____
		ADJUSTMENT _____

Other		
	Error in reporting on payroll # _____ :	was reported as _____
		should be reported as _____
		ADJUSTMENT _____