



# Overload Absence

# Adjunct Absence

*Please indicate what type of course was missed*

***This form should not be used if the instructor has stopped teaching the course(s) and is no longer the instructor of record. Notify payroll immediately if the instructor is no longer teaching the course(s).***

Name: \_\_\_\_\_

ID: \_\_\_\_\_

Department Name: \_\_\_\_\_

Org Code: \_\_\_\_\_

*Hours must be reported by the quarter hour only.*

Date	Course Missed (CRSE1301.101)	Lecture Hours Missed	Lab Hours Missed
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
	<b>TOTAL HOURS:</b>	_____	_____

Employee's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Supervisor's Signature: \_\_\_\_\_

Date: \_\_\_\_\_