

**UNPLANNED ABSENCE**

Employee Name                                 SS#   Company

Home Phone #:   Home Address:

Supervisor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Location/Department

1. Manager must complete form when an employee misses time that did not have prior approval.
2. Manager must check-in with the employee to understand the reasoning for the time missed.
3. Manager forwards the form to Talent Management and Finance.

**Please indicate the time missed and the reason for the time missed below:**

**Start Date: End Date:**

**Reason**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Please check one box below:

🖵 Absent – was unavailable for work when scheduled and did not have prior approval.

🖵 No Call No Show – did not call or show up at scheduled time.

🖵 Tardy – left early, took an extended meal period and/or arrived late without prior approval.

*I have been informed of my obligation and the impact that my absenteeism and tardiness has on other employees and on the Company. When I am absent or tardy it causes inadequate staffing, decreases employee morale, and we are unable to meet expected productivity standards throughout the organization. I understand that there are leaves that may assist me and that it is my responsibility to communicate to Talent Management in a timely manner should a leave be needed. I also understand that failure to comply with the company’s Attendance Policy, could result in corrective action up to and including separation*

Employee Signature Date Manager Signature Date

Acknowledging Request

VP, Talent Management Signature Date

Approved by

President/CEO Date