



Ball State University

Individual Absence Reports

Faculty, Professional Personnel, Exempt Staff

BSU ID Number _____ - _____ - _____

Employee Name _____

Department/Office _____

Complete one of the following for the pay period and submit to your department head:

Pay Period Beginning _____ 20th, 20____ through Ending _____ 19th, 20____

No Variations this period

I had variation from my regular schedule

Dates Absent:

Reason:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

By signing the following, I certify the above information is accurate.

(Employee's Signature)

(Date)

(Supervisor's Signature)

(Date)

Department Use only:

Kronos is due on 21st of the month, or the next business day following the weekend or holiday by noon.

Entered in Kronos by: _____

Date: _____

Signed Off in Kronos by: _____

Date: _____