Supervisor's Leaves of Absence (LOA) Tracking Form

The following form can be used to document, track, and monitor an employee who requests and is approved for a Leave of Absence (LOA). If you have specific questions on tracking or record keeping, please contact the LOA Hotline @ 480-731-8448 in the Compensation Department.

Employee Name:	
Final Approval Date:	
***Type of Leave:**	
Anticipated Start Date:	
Anticipated End Date:	
Absence Coding:	
Notes:	

If the approved leave is FMLA and will be taken intermittently or in a reduced leave capacity, please document the work schedule in the notes section provided above. You can then use the space provided below to track the leave. If the employee deviates from the pre-approved work schedule significantly, please contact the Compensation Department.

FMLA Intermittent or Reduced Leave Tracking

Date of Absence	Time/Means of Notification	Pre-approved Y / N	Reason for Absence	Comments