Leave Form Instructions

CENTRAL
OHIO
TECHNICAL
COLLEGE

Beginning in November 2022, all paper leave forms will be replaced with Dynamic Forms.
While the replacement does not automatically reduce your leave balance,
it allows for a more complete and precise paperless submission.

Leave forms created using Dynamic Forms will not need to be printed, the process is entirely digital.

All Leave forms are due in Payroll before leave begins, except for emergency situations.
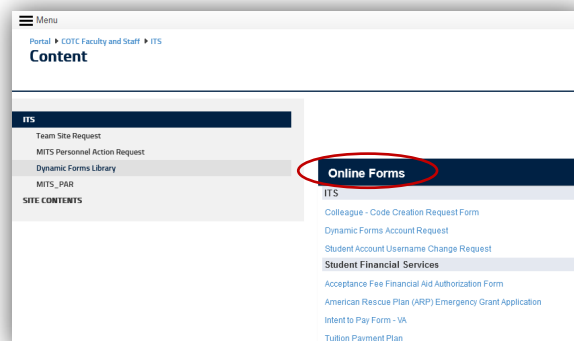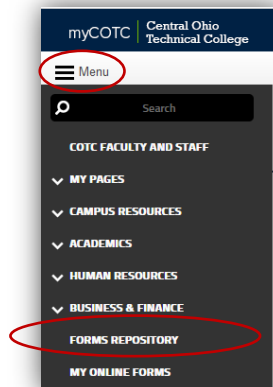Email communications will originate from notify@ngwebsolutions.com

Supervisors can skip to page 5 for review/approval instructions.

To begin: Access the Human Resources forms link here: https://www.cotc.edu/pod/hr-forms-and-documents
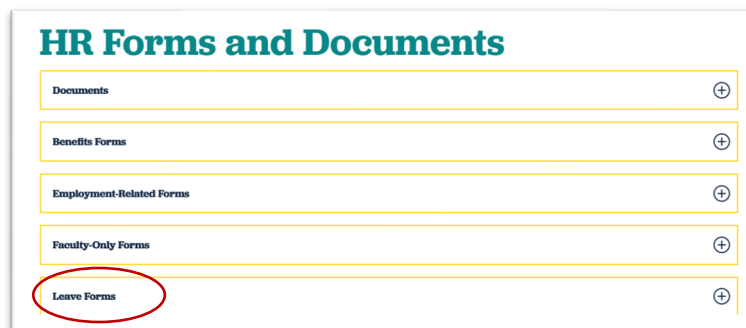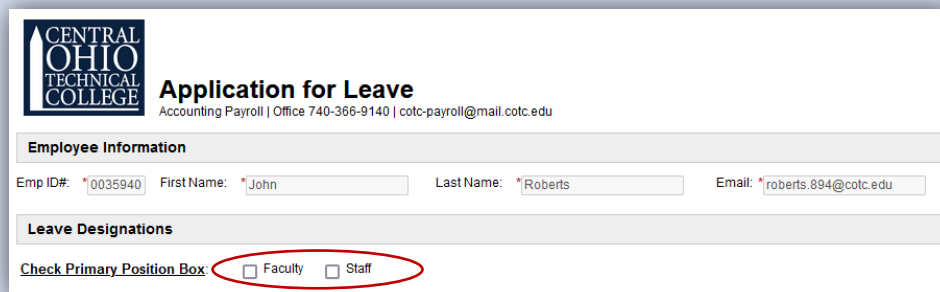

Or access the Forms Repository at MyCOTC under the Menu, and then under Online Forms:

Leave Form Instructions

Once you have accessed the Application for Leave form, notice that your ID, Name, and Email are populated for your convenience. Do not be concerned about the email suffix.
Check the appropriate box depending on if you are Faculty or Staff.

CENTRAL OHIO TECHNICAL COLLEGE

Application for Leave
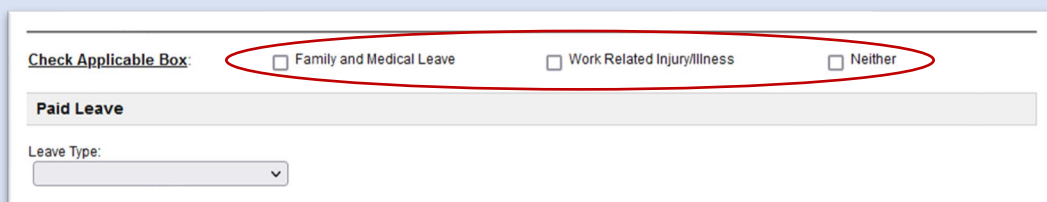Accounting Payroll | Office 740-366-9140 | cotc-payroll@mail.cotc.edu

Employee Information

Emp ID#: *0035940   First Name: *John   Last Name: *Roberts   Email: *roberts.894@cotc.edu

Leave Designations

Check Primary Position Box: ☐ Faculty   ☐ Staff

Scrolling down the form, you must choose if the leave you are requesting is approved as Work Related, or if you have been approved for Family and Medical Leave, or if Neither apply. You must select a box to proceed.
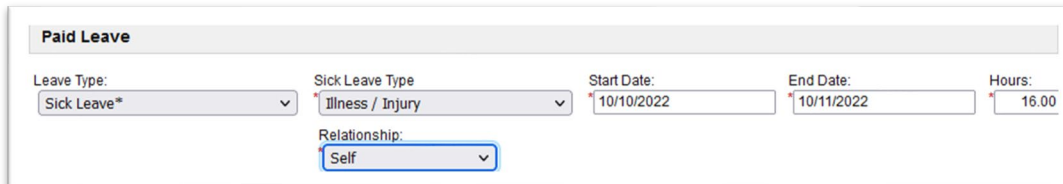
Check Applicable Box: ☐ Family and Medical Leave   ☐ Work Related Injury/Illness   ☐ Neither

Paid Leave

Leave Type:
[⌄]

Under the Paid Leave banner, use the Leave Type drop-down box to select the type of leave you are requesting.

Paid Leave

Leave Type:	Sick Leave Type	Start Date:	End Date:	Hours:
Sick Leave* ⌄	Illness / Injury ⌄	10/10/2022	10/11/2022	16.00
	Relationship: Self ⌄			

Depending on which leave type you choose, more drop-down options appear.
Be sure to select whichever drop-down option applies to you.

Select a Start and End Date. The Hours box should include the total hours applicable to that line.
You can select one date, or a range of dates. But, if you have multiple dates that have different leave hours per day, do not use a range of dates. Instead, add another Paid Leave Line for each date.

The Hours box should include the total hours applicable to that line.

Add another Paid Leave Line? ☐
(maximum of 7 lines)

Total Hours of Paid Leave: 16.00

If you have another leave you wish to request, click the box to Add another Paid Leave Line.
The form will calculate the hours of leave you are requesting automatically.

Leave Form Instructions

If you have Unpaid Leave, check the appropriate box under the Unpaid Leave banner to open more options if needed. Be sure to complete all the boxes regarding Unpaid Leave before continuing.

Unpaid Leave

☑ Unpaid Time Off* (10 or fewer consecutive days)

Beginning Date:	Ending Date:	Hours:
10/12/2022	10/13/2022	16.00

☐ Unpaid Leave of Absence
(more than 10 consecutive working days)

Unpaid Leave Designation: ☑ Medical ☐ Personal

Day Last Worked:	Last day in active pay status:	Return Date:
10/07/2022	10/11/2022	10/14/2022

Total Hours of Unpaid Leave: 16.00

If you do not have Unpaid Leave, continue scrolling down to the next section.

If you want to make a comment, although not required, use the Additional Information box.
If no comment is necessary, continue scrolling down to the Employee Signature banner.

Additional Information

Reasons for absence, etc.:

Input your Supervisor's name and email address so that your request can be reviewed/approved.
The suffix of @cotc.edu or @osu.edu must be used. The form will not recognize @mail.cotc.edu.
Click on the Employee Signature line to complete your Leave request.

Employee Signature

Appropriate documentation may be required upon request.
See Paid Leave, Unpaid Leave, Family and Medical Leave, or Military Leave policies for details.

I understand that approval of this request is contingent upon the availability of adequate leave balances. *Falsification of this Application for Leave or of the supporting documentation is grounds for disciplinary action, up to and including dismissal.*

Supervisor First Name:	Last Name:	COTC Email Address:
Amy	White	while.739.@cotc.edu
		(use '@cotc.edu' or '@osu.edu')

(click to sign)

Employee Signature   Date

Sign electronically   ✕

Please read the Disclosure / Consent before you sign your form electronically.

Typing your name exactly as it appears below signifies you are completing this form using an electronic signature. By signing electronically, you are certifying that you have read and understand the Disclosure/Consent and agree to electronically sign. You also agree to receive required disclosures or other communications related to this transaction electronically.

To continue with the electronic signature process, please enter your name and click the "Sign Electronically" button to save your information and submit your electronic signature.

John
John

Roberts
Roberts

Sign Electronically

If you would like to opt out of electronic signature, please click the "Opt out and print" link below to save your information and print a local copy for your signature.

Opt out and print

When you click on the Employee Signature line, a pop-up box will appear.

Key your name and click Sign Electronically.

Please do not click "opt out and print" as many departments are now paperless.

Leave Form Instructions

Almost done!

Click Submit Form to finalize your Leave request. You will receive email confirmations when your supervisor approves your Leave request, and when Payroll has received your Leave request.

To review your Leave forms at any time, you can access them in the MyCOTC portal under Dynamic Forms.
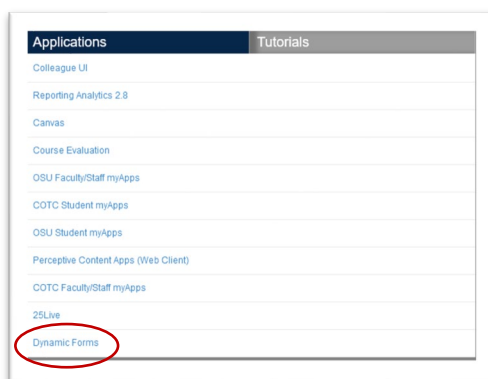
Once inside Dynamic Forms you can choose from Pending forms (not yet approved) or Forms History (approved).

That's it ! Please be aware:

➡ If you submit a timecard, you still need to input Leave hours on your timecard.
➡ If you do not submit a timecard, your leave will be processed by Payroll from this digital submission.

If you have a question regarding Leave policy, please visit the HR website here:
https://www.cotc.edu/post/policies-and-procedures

Refer to Policy 2.6.33 for Unpaid Leave
Refer to Policy 2.6.40 for Paid Leave

Leave Form Instructions

Supervisors: You will receive an email when one of your employees has submitted a Leave request.
Simply click the link within the email. The link will open the Leave request document.
Scroll down through the form reviewing the information along the way.
Before approving, be sure that the Leave type and dates are correct.
To approve the Leave request, click on the signature line under Supervisor Signature.

Supervisor Signature

(click to sign)
Supervisor Signature   Date

Staff absences require only the above signature. **Faculty** unpaid leaves and faculty paid leaves DUE TO CAMPUS BUSINESS that exceeds ten consecutive work days during an academic semester require approval by the department, college, and Provost or President (below).

Does this form need Provost or President approval? * [-- Choose -- ▾]

Save Progress | Return for Revision | Submit Form

When the pop-up box appears, input your name, then click Sign Electronically.

Sign electronically   [×]

Please read the Disclosure / Consent before you sign your form electronically.

Typing your name exactly as it appears below signifies you are completing this form using an electronic signature. By signing electronically, you are certifying that you have read and understand the Disclosure/Consent and agree to electronically sign. You also agree to receive required disclosures or other communications related to this transaction electronically.

To continue with the electronic signature process, please enter your name and click the "Sign Electronically" button to save your information and submit your electronic signature.

[Amy]
Amy
[White]
White

[Sign Electronically]

If you would like to opt out of electronic signature, please click the "Opt out and print" link below to save your information and print a local copy for your signature.

Opt out and print

Please do not click "opt out and print" as many departments are now paperless.

Under the Supervisor Signature banner, select if the form requires further approval or not.
Then click Submit Form. Your employee will receive a confirmation email, and the form will be automatically forwarded to Payroll for processing.

Supervisor Signature

...3436303238
Amy White   10/12/2022
Supervisor Signature   Date

Staff absences require only the above signature. **Faculty** unpaid leaves and faculty paid leaves DUE TO CAMPUS BUSINESS that exceeds ten consecutive work days during an academic semester require approval by the department, college, and Provost or President (below).

Does this form need Provost or President approval? * [No ▾]

Save Progress | Return for Revision | Submit Form

If the Leave request is incorrect, you can "send it back" to your employee by clicking Return for Revision option.
Please be sure to input a comment in the Additional Information section whenever rejecting leave.
An email will be sent to your employee advising them the Leave request has been rejected.

Once the employee makes the changes and submits the form the second time, the supervisor will then get another email with a link to Submit Form or Return for Revision.
If the form needs to be deleted all together, please send a request to cotc-payroll@mail.cotc.edu and include the details.

After payroll receives the completed approved leave form and acknowledges it was received, the employee will get an email stating that it is now in Payroll and ready to be processed.

Your Supervisory role is now complete.