WHITE PLAINS CITY SCHOOL DISTRICT

SALARY DOCKING FORM

This form is to be used by the location attendance reporter to notify about an employee's absence after the employee has exhausted all of his/her paid sick, personal and/or vacation time. Each time an employee is absent, this form must be emailed to humanresources@wpcsd.k12.ny.us, with a copy to payroll@wpcsd.k12.ny.us and to the employee immediately on the day of each absence.

TO:	HUMAN RESOURCES		
CC:	PAYROLL EMPLOYEE		
FROM:		(School, Bldg., Dept.)	
DATE:	(Employee Name; Position)		
RE:			
The above of	employee is absent on	(date). This employee has	
exhausted a	all of his/her sick, personal, and	d/or vacation days, as of	
	(date).		
		Principal/Building Supervisor Date	
FOR HUM	IAN RESOURCES PURPOS	SES ONLY:	
Verified by:	:	Date:	
FOR PAYI	ROLL PURPOSES ONLY:		
Payroll Date	e:	Hourly/Daily rate of Pay:	
Total # of H	Iours/Days Docked:	Total Amount Docked this P/R\$	
Calculated b	oy:	Approved by:	