TIME AND ATTENDANCE SYSTEM
SUPERVISOR/APPROVER DESIGNEE FORM

USER INFORMATION

First Name: ___________________________  Last Name: ___________________________
Department: ___________________________  SUNY ID/Campus Local ID: ______________

DESIGNEE INFORMATION

First Name: ___________________________  Last Name: ___________________________
Department: ___________________________  SUNY ID/Campus Local ID: ______________

DATE INFORMATION

Effective Date: ____________________ (mm/dd/yyyy)  End Date: __________________ (mm/dd/yyyy)
*Reauthorized on an annual basis.

OPTIONS (Please Choose One)

- Review only. (No Action)
- Review supervisor work roster, take action as necessary to approve or deny time records
  and/or time off requests

AUTHORIZATION

*Required  I, ___________________________ authorize ___________________________ to act as
  NAME  PROXY NAME
  my Supervisor/Approver Designee within the effective dates stated above.

Employee Signature: ___________________________  Date: ______________
Employee’s Supervisor Signature: ___________________________  Date: ______________
Designee Signature: ___________________________  Date: ______________
Facilitator Signature: ___________________________  Date: ______________

Supervisor/Approver responsibilities can be assigned to another employee using the designee functionality within the Time and Attendance System. Please note, that if you assign one of your employee’s as a designee, that individual cannot approve his or her own time record and/or time off request. Although Supervisor/Approvers are permitted to assign designees to review and approve time records and/or time off requests, Supervisor/Approvers have the ultimate responsibility for ensuring that their designees review and approve time records and/or time off requests on a timely basis.