

CHAIR / DEPARTMENT HEAD 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

CHAIR / DEPARTMENT HEAD NAME

DESIGNEE NAME

my Supervisor/Approver Designee within the effective dates stated above.

Chair/Department Head 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.