

Prepared by the Office of Human Resources.  
This replaces Administrative Procedure No. A9.380  
dated September 1990.

April 2010

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LEAVES

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Page 1

A9.380 VACATION AND SICK LEAVE SYSTEM

1. Purpose. To promulgate procedures in conformance with vacation and sick leave provisions in the appropriate collective bargaining agreement or applicable federal or state laws. All leaves will be taken pursuant to and consistent with the appropriate collective bargaining agreements.
2. Objective. To establish procedures for an on-line reporting and accounting system for vacation and sick leaves earned and used by eligible University personnel. Other types of leaves such as compensatory time, funeral leave, etc. are also tracked by the on-line leave system.
3. Applicability/Responsibility.
  - a. This instruction applies to all University employees who are eligible to earn vacation and/or sick leave credits.
  - b. The President, Vice Presidents, Chancellors, Secretary of the Board of Regents, State Director for Career and Technical Education, Deans and Directors or their designees are responsible for the accounting of vacation and sick leave for eligible personnel within their respective area via the on-line leave system.
4. Procedure. Leaves taken by University personnel who are on the accrual system shall be processed in the following manner:
  - a. Employee:

Employees shall input a request via the on-line leave system for all leaves taken or to be taken,

including, but not limited to, vacation and sick leave.

See user guide for employees and preparers at <[www.hawaii.edu/ohr/leave](http://www.hawaii.edu/ohr/leave)> for detailed instructions on how to submit a leave request.

b. Exception:

Employees without regular access to a computer, may elect to continue applying for leave via the UH Form 1 (see attachment A) and submitting the form to the respective department for processing.

Upon approval by the program or unit supervisor, the UH Form 1 is to be entered into the on-line leave system by the administrative/personnel officer or their designee.

5. Special Instructions.

a. Personnel Under Research Grants and Contracts.

Employees hired under research grants and contracts are subject to Administrative Procedure A8.950 Vacation Credit Fund Transfers for Extramurally funded Employees.

b. Lump Sum Payment of Accumulated Vacation.

University personnel who are on the accrual system are eligible for lump sum payment of accumulated vacation. The administrative/personnel officer shall process the necessary documents in accordance with Administrative Procedure A9.350 Application for Transfer of Vacation and Sick Leave Credit or Payment in Lieu of Vacation.

Note: The on-line leave system can only accommodate leave transactions which occur on or after the date of conversion from the batch system. The employee can access the on-line leave system by logging onto <[www.hawaii.edu/ohr/leave](http://www.hawaii.edu/ohr/leave)> and entering their UH username and password. Each employee who is eligible to earn leave will have a leave record by position number.

**HOW TO COMPLETE THE APPLICATION FOR  
LEAVE OF ABSENCE UH FORM 1 (PERS) REVISED 3/90**

**DOC. NO. 896912**

**UNIVERSITY OF HAWAII**

**APPLICATION FOR LEAVE OF ABSENCE**

PLEASE PRINT OR TYPE

01. SOCIAL SECURITY NO.  — —		02. NAME (LAST, FIRST, M. I.)          ▲ START WITH FIRST THREE LETTERS OF LAST NAME		
03. LEAVE CODE	04. TYPE OF LEAVE	01 Vacation 02 Sick (See Note 1) 03 Sick-Industrial Injury 04 Sabbatical/Prof Imp Leave with Pay	05 Bereavement (See Note 2) 06 Military 07 LWOP-Maternity 08 LWOP-Health	09 LWOP-Prof Imp Leave 10 LWOP-Other (See Note 3) 11 Compensatory Time Off 12 Jury/Witness Duty
05. INCLUSIVE DATES OF LEAVE FROM <u> / / </u> THRU <u> / / </u> MO. DAY YR. MO. DAY YR.			06. USE FOR CORRECTION ONLY THIS REPLACES DOC. NO. _____	
07. WORKING HOURS TAKEN		08. EMPLOYEE'S SIGNATURE		09. DATE
10. DEPARTMENT		11. SUPERVISOR'S SIGNATURE		12. DATE

ITEM 02. Start with first three letters of last name - example: J O N ES, Thomas T.

ITEM 05. Enter dates in six digits - example: January 5, 1990 thru January 12, 1990  
From 01 / 05 / 90 thru 01 / 12 / 90

ITEM 06. Use this item only when submitting a correction to a document previously processed.

ITEM 07. Enter hours taken to two (2) decimal places - example:  
(a) 16 hours taken should be shown as 16.00  
(b) 24 1/2 hours taken should be shown as 24.50

Note 1: A licensed physician's certificate must be attached for absences of five or more consecutive working days.

Note 2: Indicate relationship of deceased.

Note 3: Other - temporary cessation of normal operation; extended vacation; personal reason; etc.