



Leave Schedule Change Exception Request Form (University Staff)

Currently University Staff leave is on a calendar year schedule. Effective January 1, 2025 the University Staff leave schedule will transition to a fiscal year. Below is the transition timeline.

- **Current:** Calendar Year 2024 (January 1, 2024 – December 31, 2024)
- **Transition Period:** January 1, 2025 – June 30, 2025
- **Future:** Fiscal Year 2026 (July 1, 2025 – June 30, 2026)

On January 1, 2025, the start of the Transition Period, University Staff will be granted half of their annual vacation allocation.

On July 1, 2025, employees will be granted their full annual vacation allocation for fiscal year July 1, 2025 – June 30, 2026.

Employees whose vacation allocation granted during the Transition Period fails to meet their needs may request a one-time exception to receive an advance of *half of their fiscal year 2026* vacation allocation.

Instructions

To request a one-time advance of *half of your fiscal year 2026* vacation allocation during the Transition Period, complete this form and submit to your supervisor. Your request must be received by UW-Shared Services, Service Operations no later than Friday, *May 30, 2025*.

Section A: Personal Information (completed by employee)		
Name (First Name, Middle Initial, Last Name):		Today's Date:
Employee ID:	Institution:	Division/Department:
Email Address:	Phone Number:	

Section B: Reason for Exception Request (completed by employee)

Section C: Employee Signature and Date (completed by employee)
<p>By signing this form, I have read and understand the following:</p> <ol style="list-style-type: none"> 1) I confirm I will use all of my available leave balances (includes current year vacation, carryover vacation, personal holiday), and need an advance of half of my Fiscal Year 2026 vacation hours during the Transition Period. 2) This is a one-time allowance and is only available during the effective dates of UW System Administrative Policy 1200-Interim 13: University Staff and Crafts Worker Vacation, Paid leave Banks, and Vacation Cash Payouts. 3) I acknowledge that receiving this vacation advance will reduce the vacation allocation I receive on July 1, 2025 by the amount of the advance. 4) I acknowledge that any unused vacation advance received during the Transition Period (January 1, 2025 - June 30, 2025) will become vacation carryover on July 1, 2025 and the deadline to use any vacation carryover is June 30, 2026. 5) I acknowledge that if my exception request is approved, the advanced vacation may be used during the Transition Period upon approval, even though the vacation advance will be earned and based on my pay status during Fiscal Year 2026. 6) I acknowledge that if I terminate employment with the Universities of Wisconsin and I have used vacation not yet earned, I must repay the Universities of Wisconsin the value of the overused leave.



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7) I acknowledge that completing this form does not take the place of the standard processes to request and use leave time and I will need to follow the standard processes to request and use leave time.

Employee Signature: _____ Date: _____

Submit this form to your supervisor for review and signature. You will be notified of the final decision regarding leave schedule change exception request within thirty (30) days of your request being received by Human Resources.

Section D: Employee's Supervisor

Date Leave Schedule Change Exception Request Form received by employee's supervisor: _____

Date Leave Schedule Change Exception Request Reviewed: _____

Reviewer: _____

Approved Denied

Reason:

Supervisor Signature: _____ Date: _____

Supervisor:

- Inform employee your decision.
- Submit this form (both approved or denied decisions) to your [institution Human Resources Representative](#).

Section E: Institution Human Resources (HR) Representative

Date Leave Schedule Change Exception Request Form received by institution HR Representative: _____

Date Leave Schedule Change Exception Request Reviewed: _____

Reviewer: _____

Approved Denied

Reason:

Institution HR Representative Signature: _____ Date: _____

Institution Human Resources Representative:

- Reviews employee's supervisor decision.
- Confirms any additional approvals that may be required by their institution.
- Informs employee of the final decision.
- Confirms all fields and sections on the form are completed.
- For approved requests after completing Section E, submit completed form to UW-Shared Services, Service Operations at serviceoperations@support.wisconsin.edu no later than Friday, May 30, 2025.

Section F: UW-Shared Services, Service Operations

Date Leave Schedule Change Exception Request Form Received: _____

Date vacation balance was updated in HR system (half of Fiscal Year 2026 allocation): _____

Number of vacation hours advanced: _____

Date UW-Shared Services, Service Operations provided employee the number of hours advanced: _____

UW-Shared Services, Service Operations is responsible for informing the employee of the number of hours advanced.