



Human Resources
DOCK NOTICE

Payroll Form #702, Rev 01/19

PAY PERIOD: (Month/Year) \_\_\_\_\_

NAME: \_\_\_\_\_

SFSU ID #: \_\_\_\_\_

DEPT. NAME: \_\_\_\_\_

Full Time Part Time (Time Base) Exempt Non Exempt

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Please indicate the number of hours the employee is to be docked by writing the number of hours in the box that corresponds to the day(s) the dock occurred.

Table with 18 columns (Date 1-15) and 2 rows (# Hours)

Table with 18 columns (Date 16-31) and 2 rows (# Hours)

Reason for Absence: \_\_\_\_\_

TOTAL DOCK: # OF HOURS

Please choose a check box below if this form is prepared by employee:

Repay the dock hours by: Payroll Deduction Personal Check (exact amount will be provided by payroll)

CERTIFICATION:

Prepared By: Date:

Preparer's Signature: Phone :

Approved by: Date:

Approver's Signature: Phone :

Note: This Dock Notice must be submitted to the Human Resources Payroll Office (ADM 252) immediately for any absences that will result in a dock. Corresponding entries of "L" and the number of hours docked should be inserted on the Attendance Report (Form #672). All hours need to be entered in Absence Management System. Questions regarding this dock notice, call your Payroll Specialist or Human Resources Information Desk at extension 81872.

CC: Employee/Attendance Clerk