

**TEXAS TECH UNIVERSITY HEALTH SCIENCES CENTER EL PASO
APPLICATION FOR LEGISLATIVE LEAVE
FOR PEACE OFFICERS**

I. To be completed by applicant:

Date: _____

Name: _____ Employee R#: _____

Dates of requested leave From: _____ Through: _____

Purpose of requested leave: _____

Source of funds to be used to reimburse TTUHSCEP: _____

Signature of Employee

ROUTE FORM TO TTUHSCEP POLICE

II. To be completed by TTUHSCEP Police

a. Is this employee a certified peace officer: _____ Yes _____ No

b. How will employee's duties be performed during the absence? Provide names of replacement employees and number of hours each is expected to work:

c. Account number to be reimbursed: _____

Signature of TTUHSCEP POLICE

**ROUTE FORM TO EXECUTIVE
DIRECTOR HUMAN RESOURCES
(EDHR)**

III. To be completed by Executive Director Human Resources

- a. Salary to be paid to employee during leave _____
 - b. Longevity pay to be paid _____
 - c. Premium sharing to be paid _____
 - d. Value of vacation accrued _____
 - e. Value of sick leave accrued _____
 - f. TRS/ORP matching contributions _____
 - g. Social Security matching contributions _____
 - h. WCI coverage cost _____
 - i. Salary of replacement employee(s) _____
 - j. Longevity pay for replacement employee(s) _____
 - k. Premium sharing for replacement employee(s) _____
 - l. Value of vacation accrued by replacement employee(s) _____
 - m. Value of sick leave accrued by replacement employee(s) _____
 - n. TRS/ORP matching contributions for replacement employee(s) _____
 - o. Social Security matching contributions for replacement employee(s) _____
 - p. WCI coverage cost for replacement employee(s) _____
- TOTAL COST OF LEAVE** _____

ROUTE APPLICATION TO EMPLOYEE

Pay above amount to the Bursar and return application to EDHR for approval.

\$ _____ received and deposited to: FOP: _____

Signature of Bursar Date

Approved: _____
Signature of EDHR Date

RETURN APPLICATION TO:

Employee Human Resources File
TTUHSCEP Police