



Sam Houston State University

A Member of The Texas State University System

Payroll Office
PO Box 2095
Huntsville, TX 77341
936/294-1094
FAX 936/294-1099

DEPT: _____

DATE: _____

AUTHORIZATION TO SIGN LEAVE REPORTS AND/OR TIME SHEETS

List below signatures of individuals authorized to sign Time sheets and/or Leave Reports until further notice. Limitations or special circumstances should be noted in the Specific Instructions area.

- Time Sheets
- Leave Reports

Department Head (Printed Name) Required	Signature	<input type="checkbox"/> Time Sheets
		<input type="checkbox"/> Leave Reports
Alternate Designee (Printed Name)	Signature	<input type="checkbox"/> Time Sheets
		<input type="checkbox"/> Leave Reports
Alternate Designee (Printed Name)	Signature	<input type="checkbox"/> Time Sheets
		<input type="checkbox"/> Leave Reports
Alternate Designee (Printed Name)	Signature	<input type="checkbox"/> Time Sheets
		<input type="checkbox"/> Leave Reports
Alternate Designee (Printed Name)	Signature	

Specific Instructions (if any):
