



Sam Houston State University

A Member of The Texas State University System

People Ops – Payroll
John W. Thomason Bldg
Suite 202

AUTHORIZATION TO APPROVE LEAVE REPORTS AND/OR TIMESHEETS

NOTE: A NEW FORM IS REQUIRED WHEN SUBMITTING ANY DEPARTMENTAL CHANGES

Effective Date _____

Department Name: _____ Organization # : _____ (one org/form)

Contact Name: _____ Contact Phone: _____

List below signatures of individuals authorized to approve Timesheets and/or Leave Reports. **Digital signatures are not accepted.**

The Department Head will be activated for electronic approval by the Payroll Office. Other authorized employees will need to be proxied by the Department Head for electronic approval.

Timesheets
 Leave Reports

Department Head (Printed Name) Required Sam ID Position # Signature

Timesheets
 Leave Reports

Alternate Designee (Printed Name) Required Sam ID Position # Signature

Timesheets
 Leave Reports

Alternate Designee (Printed Name) Required Sam ID Position # Signature

Timesheets
 Leave Reports

Alternate Designee (Printed Name) Required Sam ID Position # Signature

Timesheets
 Leave Reports

Alternate Designee (Printed Name) Required Sam ID Position # Signature

Please include specific Instructions (if any). Please also list any CWS positions that are under this Org.

Please use additional signature forms as needed.

Email: payroll_office@shsu.edu
Phone: 936-294-1273