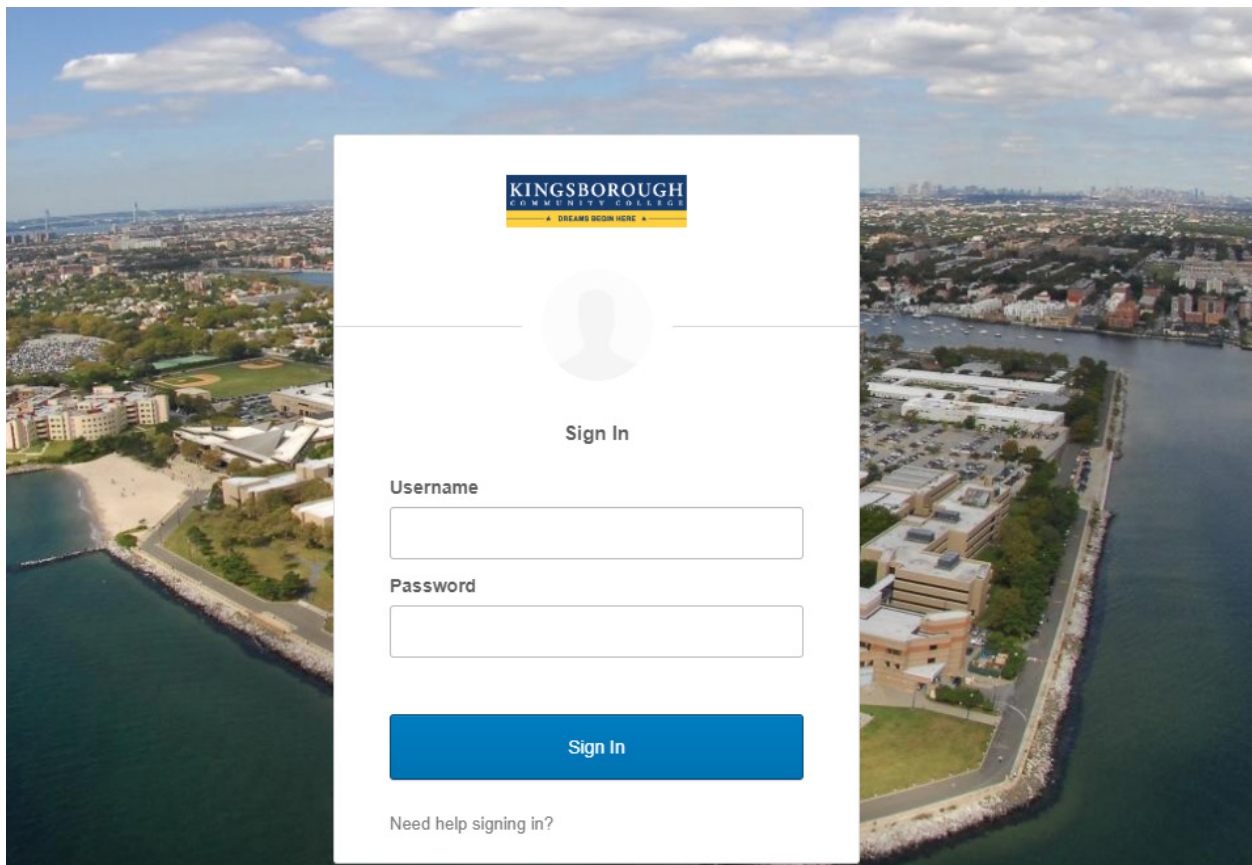


Requesting leave using the online form

Step 1: from the college's website <http://www.kbcc.cuny.edu>

- a- click on "Faculty & Staff" on top of the page.
- b- -click on "Human Resources"
- c- -click in the middle of the page, on "click to learn more"
- d- -click on "Request for Leave for Fulltime Staff and HEO's"

Step 2: log in, using your college email address & password.



Step 3: You have arrived at the following page, please click on "Complete This Form"


Please note that at this stage, you may be informed if you have already started filling out a request previously. If so, just click on "Complete This Form", as shown in the image below.


Welcome to Dynamic Forms


Duplicate Form Found


A copy of this form was submitted on: **Tuesday, November 19, 2019 11:11 AM.**

What would you like to do?

 Complete This Form

 Pending / Draft Forms

 Forms History

 Manage your Account

Step 4: From the dropdown menu down as shown below, please select your listed manager or listed supervisor then click continue. If your manger/supervisor is not in the list, please click on the link below the dropdown menu, and fill in the required information for your current supervisor, then click "Continue".

Instructions

Form Participants

Manager

Please select your supervisor who will receive your form request, from this list:

Please select

[This information is not correct. allow me to enter the email manually](#)

Please note: Selection of a different e-mail address will be noted on your record.

Continue

Step 5: You are be presented with the leave form, where some of your identifying fields are prefilled with your First, Last, Emplid, and your email address; instead of the blue lines in the image below. Please fill out the remaining fields marked with "Red Asterisk"

Please check the "Type of Leave" you are applying for then fill in the amount of days and the amount of hours.

Examples:

EX 1: if you are requesting 4 hours leave, I would fill in 0 (Zero) under Days, and 4 under Hours.

EX 2: if you are requesting 7 hours leave, I would fill in 0 (Zero) under Days, and 7 under Hours. This also can be filled out by 1 under Days, and 0 (zero) under Hours.

The rest of the form is self-explanatory. If you have filled out the form and you are still unsure about your plans, you can click on "Save Progress" for you to finalize later. Once you have filled out all required sections, click on "Next".

KINGSBOROUGH COMMUNITY COLLEGE

★ DREAMS BEGIN HERE ★

APPLICATION FOR LEAVE

All requests should be submitted 5 days in advance.

First Name: * Last Name: * Emplid: *
Job Title: * Office Contact Number: *
Department: * Email: * @kbcc.cuny.edu

Type Of Leave: Please check at least one type below and enter day(s) / hour(s)

	Day (s)	Hour (s)	
<input type="checkbox"/> Annual	<input type="text"/>	<input type="text"/>	
<input type="checkbox"/> Compensatory	<input type="text"/>	<input type="text"/>	
<input type="checkbox"/> Unscheduled	<input type="text"/>	<input type="text"/>	
<input type="checkbox"/> Hol. comp.	<input type="text"/>	<input type="text"/>	
<input type="checkbox"/> Sick Leave for scheduled doctor's appointment*	<input type="text"/>	<input type="text"/>	* Documentation for sick leave must be forwarded to human resources.

Total Leave Requested = * *

Indicate the start and end of your leave bellow. Submit separate forms if there are breaks. DO NOT LUMP TOGETHER.

Begin Date * End Date** *

**For 1 day leave, use the Begin date.

Requester's comments:

The following section is to be completed by the supervisor / manager:

One of the following 2 options must be selected for the "Leave Form" to be complete:

- * The request is approved
 The request is denied

Supervisor's comments:

Save Progress

Next

Step 6: Electronic Signature, as show in the below image. Once you type in your First & Last Name, click on “Sign Electronically”. You will automatically receive an email confirming your request.

Electronic Signature

Please read the [Disclosure / Consent](#) before you sign your form electronically.

Typing your name exactly as it appears below signifies you are completing this form using an electronic signature. By signing electronically, you are certifying that you have read and understand the Disclosure/Consent and agree to electronically sign. You also agree to receive required disclosures or other communications related to this transaction electronically.

To continue with the electronic signature process, please enter your name and click the "Sign Electronically" button to save your information and submit your electronic signature.

Previous

Sign Electronically

If you would like to opt out of electronic signature, please click the "Opt out and print" link below to save your information and print a local copy for your signature.

[Opt out and print](#)