

**TIME ENTRY APPROVER / DEPARTMENT TIME ORIGINATOR  
AUTHORIZATION FORM**

<b>I APPROVER/ ORIGINATOR PERSONAL INFORMATION</b>	<hr/> Employee Name:    Last                      First                      Middle                      M - Number  <hr/> MSU Email Address                                      Department or Office                                      Campus Phone
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<b>II ROLE ASSIGNMENT</b>	<b>Check One:</b> <input type="checkbox"/> Approver <input type="checkbox"/> Department Time Originator  <b>Required:</b> All Approvers and Originators need a designated proxy.  <hr/> Proxy Employee Name:    Last                      First                      Middle                      M - Number
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<b>III ASSIGNMENT TYPE</b>	<b>Check One:</b> <input type="checkbox"/> Interim <input type="checkbox"/> Permanent  Is this a replacement Approver/Oriinator? <input type="checkbox"/> Yes <input type="checkbox"/> No    If Yes, for whom? _____ <span style="margin-left: 600px;">Name &amp; M - Number</span>  Effective Date _____ (mm/dd/yyyy) This date should be at the start of a pay period, e.g. 1 <sup>st</sup> or 16 <sup>th</sup>
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<b>IV EMPLOYEES ASSIGNED TO APPROVER/ ORIGINATOR  (continuation for additional entries)</b>				<b>Time/Leave Entry Type</b>		
	<b>Last Name</b>	<b>First Name</b>	<b>M - Number</b>	<b>Time Sheet</b>	<b>Leave Report</b>	<b>Dept. Time Entry</b>

<b>V COMMENTS</b>	<hr/> <hr/> <hr/>
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<i>Payroll Use Only</i> Initial & Date _____ TSØ# _____ Beginning Payroll Number _____
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<b>VI APPROVAL</b>	
<hr/> Department Head/Director (Print)	
<hr/> Signature	<hr/> Date

DISTRIBUTION: Forward original form to the Payroll Office and retain copy for your files.