



Coordinator \_\_\_\_\_

Date of Exception \_\_\_\_\_

*Exception reports ensure that direct care employees are paid in a timely manner for hour's works outside of their regularly assigned shift for which they were hired to work. Employees will not be paid for these hours without the prior approval of their supervisor and the Program Director. Therefore, all employees should not have worked without first getting those approvals. Failure to accurately and completely fill out this form will lead to disciplinary action up to, and including, termination of employment.*

Home \_\_\_\_\_

#	Employee Name (First & Last)	Start Time (AM/PM)	End Time (AM/PM)	Regular Assigned Work Location & Shift	Reason for employee working outside of shift. Use <b>Codes</b>
1					
2					
3					
4					
5					
6					

Home \_\_\_\_\_

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**Codes for Reasons for employees working outside of their regular assigned shift:**

<b>1</b>	Medical Appointment ( <b>Provide individuals name</b> )	<b>6</b>	Covering for staff that did not show to work ( <b>Provide staff name &amp; employee warning</b> )
<b>2</b>	Individual did not attend day program ( <b>Provide individuals name &amp; why</b> )	<b>7</b>	Time/Attendance system not working
<b>3</b>	Delay in going to day program ( <b>Provide individuals name &amp; why</b> )	<b>8</b>	Staff failed to clock in or out ( <b>Provide staffs name &amp; attach employee warning</b> )
<b>4</b>	Working a shift no staff has been hired to fill ( <b>Provide shift letter</b> )	<b>9</b>	Staff was assigned to 'mentor' a new hire
<b>5</b>	Covering for staff on approved leave ( <b>Provide Staffs name &amp; provide leave form</b> )		

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**Center for Social Change, Inc.**

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7					

Completed By:

Approved By:

Program Coordinator	Date	Program Director	Date
		Senior Accountant	Date
		Finance Director	Date