



**COOK COUNTY SHERIFF'S OFFICE
DUTY STATUS FORM**

SECTION I GENERAL INFORMATION

CHECK THE BOX THAT APPLIES TO THIS DUTY STATUS CORRECTION:

- NON-IVR RELATED DUTY STATUS CORRECTION – Complete Section I and Section III.
- IVR RELATED DUTY CORRECTION – Complete Section I, the applicable portion of Section II and Section III.

CORRECTION LOCATION:	DATE OF CORRECTION:
EMPLOYEE NAME (IN NEED OF CORRECTION):	EMPLOYEE JDE NUMBER:
INCORRECT CODE:	CORRECT CODE:

EXPLANATION AND/OR SUPPLEMENTAL DOCUMENTATION REQUIRED:

N/A SECTION II IVR NOTIFICATION USE ONLY

TO BE COMPLETED BY SUPERVOR AFTER BEING NOTIFIED BY EMPLOYEE (IF APPLICABLE):

- IVR Call Fail – Supervisor notified by employee that he/she was notified to call-in by the IVR system.

TIME SUPERVISOR NOTIFIED:	DATE SUPERVISOR NOTIFIED:	DATE OF ABSENCE:
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TO BE COMPLETED BY EMPLOYEE UPON RETURN TO WORK (IF APPLICABLE):

- IVR Employee Entry Error (e.g., too many or not enough FMLA hours entered on IVR call by employee). An explanation is required in Section One.

SECTION III ACKNOWLEDGEMENT

EMPLOYEE (NAME): <input type="checkbox"/> EMPLOYEE NOT AVAILABLE	SIGNATURE:	STAR NUMBER:	DATE:
SUPERVISOR (NAME):	SIGNATURE:	STAR NUMBER:	DATE:

SECTION IV PAYROLL USE ONLY

PAYROLL MEMBER (NAME):	SIGNATURE:	DATE:	<input type="checkbox"/> APPROVED <input type="checkbox"/> DENIED
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(FCN-32) (APR 19)

ORIGINAL – PAYROLL

COPY – DIVISION/UNIT/TIMEKEEPER

COPY – EMPLOYEE

I certify that no political reasons or factors were considered in any decisions I made or action I took related to this Employment Action. Further, I do not know of, or have any reason to believe that anyone else considered or took action based on political reasons or factors with respect to this employment action.