



**UNIVERSITY SYSTEM  
OF GEORGIA**

**VACATION CASH OUT REQUEST FORM  
Monthly to Bi-Weekly Transition**

Employees impacted by the 2016 Department of Labor FLSA regulatory updates are eligible to exercise a special one-time option to use up to 48 annual leave hours to assist them in transitioning from a monthly to bi-weekly pay cycle.

The following conditions apply to this option:

- This is a one-time option which may be exercised up through June 9, 2017
- Only annual leave or floating holidays may be used. An employee may not use nor convert sick leave for this purpose.
- Only hours which have already been accrued may be requested. Employees may not request future leave accruals which have not yet been earned at the time of the request.
- Employees with less than 48 hours are allowed to use their full available annual leave balance.
- Hours cannot be bought back at a later time for future use

If you would like to request a vacation cash out, complete the section below and submit this form to your HR Department by the dates outlined in the attached payroll schedule. Any forms received after the specified deadlines will be paid out on the following payroll (with the exception of the final deadline of June 9, 2017).

**EMPLOYEE INFORMATION**

Last Name, First Name: \_\_\_\_\_ Employee ID No. \_\_\_\_\_

**VACATION CASH OUT PAYMENT REQUEST**

Number of Accrued Annual Leave Hours to Cash Out: \_\_\_\_\_ (Hours)

Number of Floating Holiday Leave Hours to Cash Out: \_\_\_\_\_ (Hours)

Requested Pay Date (refer to the attached bi-weekly payroll schedule): \_\_\_\_\_

**CERTIFICATION**

This form serves as my formal request to have the specified annual leave/floating holiday hours paid out on (Date)\_\_\_\_\_. I understand that my leave balances will be decreased by the number of hours I have requested for payment and **those hours will no longer be available for use as of the approval date by HR.** I understand that this payment is subject to standard payroll deductions and is tax reportable. I also understand that, because this cash out is considered a supplemental payment by the IRS, a higher tax rate will apply to the vacation cash out hours I receive associated with this request. I further understand that the request for vacation cash out payment, once approved, is irrevocable.

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**FOR ADMINISTRATIVE USE ONLY**

Current Annual Leave Balance: \_\_\_\_\_ Annual Leave Balance After Payment: \_\_\_\_\_

Employee has been approved and processed for payment: \_\_\_\_\_

Signature

Date

C: Employee  
Home Department



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**BI-WEEKLY PAYROLL SCHEDULE**

**DEADLINES FOR ANNUAL LEAVE PAYMENT REQUEST**

<b>Pay Period Begin Date</b>	<b>Pay Period End Date</b>	<b>Pay Date</b>	<b>DUE DATE FOR ANNUAL LEAVE PAYMENT REQUEST</b>
10/22/2016	11/04/2016	11/10/2016	<b>10/28/2016</b>
11/05/2016	11/18/2016	11/25/2016	<b>11/11/2016</b>
11/19/2016	12/02/2016	12/09/2016	<b>11/25/2016</b>
12/03/2016	12/16/2016	12/23/2016	<b>12/09/2016</b>
12/17/2016	12/30/2016	01/06/2017	<b>12/23/2016</b>
12/31/2016	01/13/2017	01/20/2017	<b>01/06/2017</b>
01/14/2017	01/27/2017	02/03/2017	<b>01/20/2017</b>
01/28/2017	02/10/2017	02/17/2017	<b>02/03/2017</b>
02/11/2017	02/24/2017	03/03/2017	<b>02/17/2017</b>
02/25/2017	03/10/2017	03/17/2017	<b>03/03/2017</b>
03/11/2017	03/24/2017	03/31/2017	<b>03/17/2017</b>
03/25/2017	04/07/2017	04/14/2017	<b>03/31/2017</b>
04/08/2017	04/21/2017	04/28/2017	<b>04/14/2017</b>
04/22/2017	05/05/2017	05/12/2017	<b>04/28/2017</b>
05/06/2017	05/19/2017	05/26/2017	<b>05/12/2017</b>
05/20/2017	06/02/2017	06/09/2017	<b>05/26/2017</b>
06/03/2017	06/16/2017	06/23/2017	<b>06/09/2017</b>