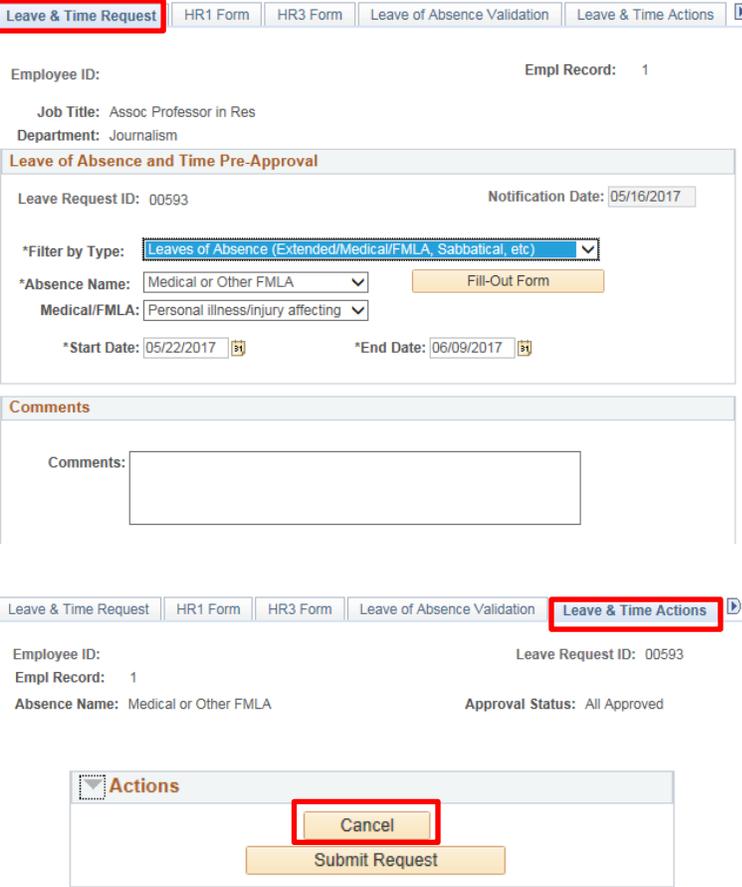# University of Connecticut

Modifying or Canceling a Leave: Non-Time Reporters

Overview   UConn non-time reporters will use this job aid to assist them in modifying or canceling a previously submitted leave of absence (separate job aids for modifying sabbaticals or faculty personal and special leaves).

Reminder: Foreign Nationals on a University of Connecticut sponsored visa should consult with the Department of International Services and Programs regarding the impact of leaves of absence on their visa status and eligibility.

Process Steps

Step	Action	Screenshot
1	Navigation: **Main Menu > Self Service > Leave Management > Leave Request** or From your **Home** page, under **Leave Management**, click **Submit or Modify Leave Request**	
2	On the **ESS Leave Request** page, click the **Find an Existing Value** tab. Your employee ID will auto-populate and cannot be changed. If you know the leave request ID, enter it next to **Leave Request ID.** Click **Search.**	

Step	Action	Screenshot
3	Under **Search Results** and column header **Leave Type,** click on leave you want to modify.	
4a	Your previous leave request will open on the **Leave & Time Request** tab. To cancel your leave, click on **the Leave & Time Action** tab. From the **Leave and Time Action** tab, click **Cancel**. A system notification will be sent to previous approvers notifying them the request was canceled.	

Step	Action	Screenshot
4b	To modify your leave, click on each of the tabs and make your changes. Recheck the attestation box on any relevant forms, which will update the signature date. On the **Leave & Time Action** tab, click **Submit Request**. Your modified leave request will be circulated to the approvers for approval. You will be system-notified by email when your modified leave is approved.	Leave & Time Request HR1 Form HR3 Form Leave of Absence Validation Leave & Time Actions Employee ID: Empl Record: 1 Job Title: Assoc Professor in Res Department: Journalism **Leave of Absence and Time Pre-Approval** Leave Request ID: 00593 Notification Date: 05/16/2017 *Filter by Type: Leaves of Absence (Extended/Medical/FMLA, Sabbatical, etc) *Absence Name: Medical or Other FMLA Fill-Out Form Medical/FMLA: Personal illness/injury affecting *Start Date: 05/22/2017 *End Date: 06/09/2017 **Comments** Comments: Leave & Time Request HR1 Form HR3 Form Leave & Time Action Employee ID: Leave Request ID: 00581 Empl Record: 0 Absence Name: Medical or Other FMLA Approval Status: Needs Approval **Actions** Cancel Submit Request