



THE OHIO STATE UNIVERSITY

COLLEGE OF ARTS AND SCIENCES

HR Exception Approval Request

Exception Type:

Org:

Employee ID#:

Name:

I request an exception for the following

reason(s):

(Please provide the "who, what, when, where,
and why" of the situation.)

Dept Manager / Fiscal Officer Signature

Printed Name

Date

Chair / Director Signature

Printed Name

Date

HR Director Signature

Printed Name

Date

**Please include all relevant documentation and upload this completed form to your request*