



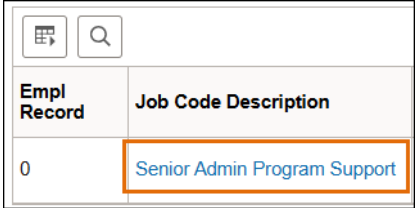
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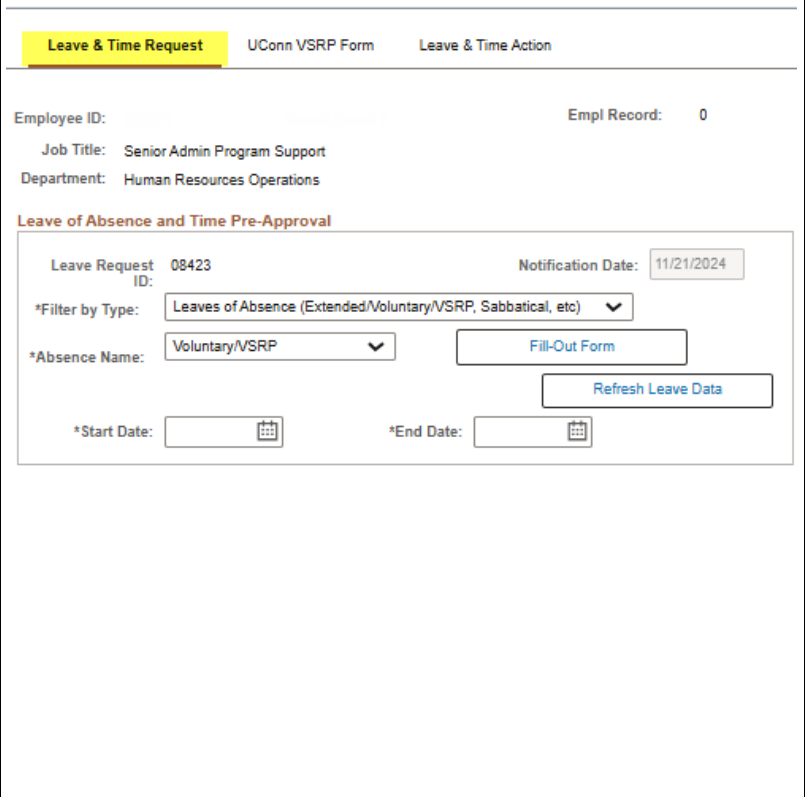
University of Connecticut

Submitting a Leave Request: VSRP

Overview Employees will use this job aid to submit a Voluntary Schedule Reduction Program (VSRP) leave request in Core-CT.

Process Steps

Step	Action	Screenshot
1	Navigation: Employee Self Service > Leave Management > Submit, Search, Modify Leave	
2	On the Submit, Search, Modify Leave page, the active employment records associated with your name will populate. To Submit a New Leave Request , choose the appropriate Empl Record/Job Code Description that you are taking leave from by clicking on the Job Code Description link associated with that record.	

Step	Action	Screenshot
3	<p>Your job information will populate on the top of the Leave & Time Request tab.</p> <p>Select the following:</p> <ul style="list-style-type: none"> • Filter by Type: Leaves of Absence • Absence Name: Voluntary/VSRP <p>Enter the Start Date and End Date.</p> <p>The Comments section allows employees to provide additional information.</p> <p>Once complete, click Fill-Out Form or the UConn VSRP Form tab.</p>	 <p>The screenshot displays the 'Leave & Time Request' tab in a web application. At the top, there are three tabs: 'Leave & Time Request' (highlighted in yellow), 'UConn VSRP Form', and 'Leave & Time Action'. Below the tabs, the following information is shown:</p> <ul style="list-style-type: none"> Employee ID: [Redacted] Empl Record: 0 Job Title: Senior Admin Program Support Department: Human Resources Operations <p>The main section is titled 'Leave of Absence and Time Pre-Approval' and contains the following fields and buttons:</p> <ul style="list-style-type: none"> Leave Request ID: 08423 Notification Date: 11/21/2024 *Filter by Type: Leaves of Absence (Extended/Voluntary/VSRP, Sabbatical, etc) [Dropdown] *Absence Name: Voluntary/VSRP [Dropdown] Buttons: Fill-Out Form, Refresh Leave Data *Start Date: [Calendar Icon] *End Date: [Calendar Icon]

Complete the form.

Important Note: You must complete a separate form for each fiscal year. For example, if you will be working a reduced schedule over the summer, you must complete one request for the period prior to 7/1 and another request for the period 7/1 and later.

Click on the attestation under the **Employee Statement** section, which will automatically populate the signature date.

The names of the approvers will auto-populate on the form, which will be circulated for approval after you submit the request.

Click **Next** below your electronic signature, which will take you to the **Leave & Time Action** tab.

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VOLUNTARY SCHEDULE REDUCTION PROGRAM (VSRP) APPLICATION
SECTION 1: TO BE COMPLETED BY EMPLOYEE

Name: _____ Department: Human Resources Operations Employee Number: _____

Contact Information: 880/857-1234

Program Options:
 Fiscal year: _____
 Sporadic Days Off (full or partial). The actual date(s) and hours if partial days I am requesting off are:

	Start Date	Start Time	End Time	Duration (Hours)	
1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Reduction in scheduled weekly hours during the period of: From _____ To _____
 The number of hours of VSRP I will be taking on each workday:
 Monday Tuesday Wednesday Thursday Friday Saturday Sunday
 Total Number of Hours Per Week:
 Please indicate below the schedule you will be working for any partial workdays.

Leave of Absence (5 consecutive days or more) during the period of: _____ To _____
 (not to exceed 24 weeks per application, except for educational purposes)

Employee Statement
 I am a permanent State employee and request to take unpaid voluntary leave pursuant to CGS §5-248c. I understand (1) the VSRP is voluntary on my part, (2) the approval of my request is at management discretion which is not subject to the grievance or arbitration procedure, (3) leave taken under the VSRP will not be counted toward completion of the promotional working test period, and (4) this arrangement may be modified, amended or terminated at any time prior to the leave by management, or myself, with or without cause.

I hereby confirm that I have read this form which accompanies my leave request and can attest that the information contained herein is accurate to the best of my knowledge.

Signature: _____ Date: _____

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SECTION 2: APPROVALS

I hereby confirm that I have reviewed this leave request and am electronically submitting my approval or denial.
 I RECOMMEND APPROVAL OF THIS REQUEST.
 I AM UNABLE TO RECOMMEND APPROVAL OF THIS REQUEST BECAUSE:

Supervisor
 Signature: _____ Date: _____

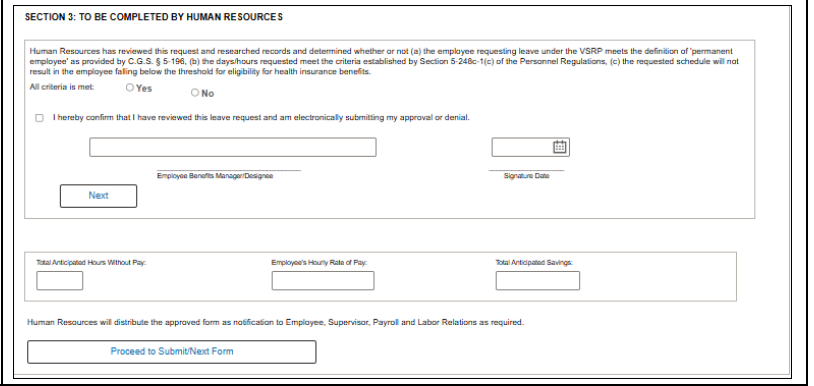
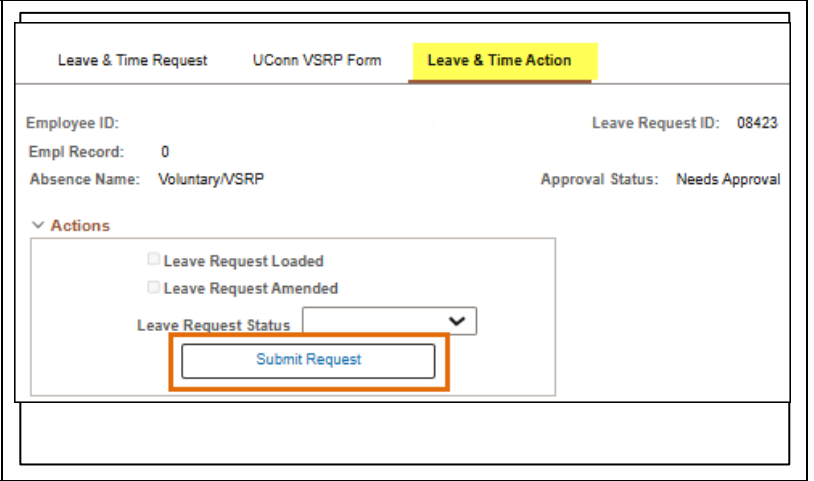
[Next](#)

I hereby confirm that I have reviewed this leave request and am electronically submitting my approval or denial.
 I RECOMMEND APPROVAL OF THIS REQUEST.
 I AM UNABLE TO RECOMMEND APPROVAL OF THIS REQUEST BECAUSE:

Department Head
 Signature: _____ Date: _____

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Job Aid: Submitting a Leave Request: Voluntary Schedule Reduction Program (VSRP)

Step	Action	Screenshot
		
5	On the Leave & Time Action tab, click Submit .	
6	The VSRP request is electronically circulated for review and consideration of approval. You will be able to view the status of your leave request at any time. You will receive an email when your leave has been approved.	