

## Texas A&M University Leave Transfer From Other State Agency

Employee Name	Texas A&M Hire Date

**INSTRUCTIONS** The employee above recently joined Texas A&M University and indicated that s/he was previously employed by your agency. In order to insure available leave balances are transferred accurately, we request that you complete and return this form to us as soon as possible by fax or scanned through email. Please return this information to us at

## I. Texas A&M University Contact Information:

Texas A&M University Representative	Phone
Fax	Email Address

## II. To be completed by the prior state agency or institution:

Termination Date With Your Agency	Did employee receive lump-sum payment for unused vacation hours?	
Vacation Hours Available for Transfer	Sick Leave Hours Available for Transfer	
Additional Comments:		
The above information was prepared by: (please		

The above information was prepared by: (please print):		
	Signature	Date
Phone	Email Address	
Agency Name:		

## SUBMIT FORM TO TEXAS A&M UNIVERSITY

Contact Information given in Item I

FOR FORMS ASSISTANCE: Benefits Services (979) 862-1718 hrcompbenefits@tamu.edu