

## EXCEPTION TIME REPORTING– NON-TEACHING FACULTY AND STAFF

1. Log into myLCC and select Exception Time Reporting on the Work Tab under Employee Benefits box.

The screenshot shows the myLCC portal interface. At the top, the user is logged in as Barbara Farr. The navigation menu includes News, School, Work (circled in red), Profile, Resources, Strategic Directions, and My Page. Below the navigation, there are several sections: Approval Alerts (no pending documents), Employee Benefits (with links for Tuition Waiver, Benefits, Leave Details, and Exception Time Reporting, where the last link is highlighted with a red arrow), and Employment Details (with links for Employee Dashboard, Pay Stub, Job Details, and Direct Deposit). On the right side, there is a Time Reporting section with a Time Sheet and a Leave Request, both with links to More details.

2. Complete the form:

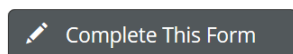
*Click on the Complete This Form to launch the Dynamic Form – Note a separate form is required if you have more than 1 reason for exception time reporting (example: work is done in relationship to COVID-19 and on a federal grant – one form would be required for the COVID-19 work and one form would be required for the federal grant.)*

The screenshot shows the Lansing Community College logo at the top. Below it is a search bar with the text 'LCC - Grants' and a 'Go' button.

### Welcome to Dynamic Forms

Let's get started, Barbara.

The Exception Reporting Log form needs to be completed.

 Complete This Form

You can check back here anytime to view your Pending / Draft Forms and review your completed Forms History.

Thank you for using Dynamic Forms!

See the screen shot below for the fields to complete and notes regarding aspects of the employee portion of the form



## Exception Reporting Log

Financial Services  
Lansing Community College  
309 N. Washington Square, Suite 203  
Lansing, MI 48933  
Main Phone: 517-483-1737  
Fax: 517-483-9876

Employee First Name	Employee Last Name	Employee User Name	Employee Email	Employee Banner ID
* Barbara	* Farr	* farrb	* farrb@star.lcc.edu	* X00018808

### Instructions

- Data entry must be completed on this form electronically.
- Enter data on form below based on bi-weekly pay schedule.
- Once the form is completed scroll down and click "Submit Form" to send it to your supervisor.
- Supervisor must sign and date form electronically and click "Submit Form".

The employee information auto-populates based on the single sign on in myLCC

### Exception Time

Are you submitting this exception time as a faculty member?

What is the reason for the exception?

If Grant, enter the grant name:

Is there an account index code?

If Yes, please enter the account index code:

Select the appropriate item in the drop down boxes and fill in the grant information or select the appropriate non-grant reason.

### Who is your approving supervisor?

First Name:  \*Please use formal legal first name and only capitalize first letter.

Last Name:  \*Please use formal legal last name and only capitalize first letter.

Email:  \*Please use @star.lcc.edu email address.

Pay close attention to the instructions legal name and full correct email are required or the form will not process properly!

### Exception Time Entry

Enter last **Saturday** of the pay period:  This field is required. \*A table with the full two week pay period will appear when you enter a date.

Enter the Saturday that the pay day ends on. Once the date is input, the table will build

The drop down for faculty member is either a yes or no. All non-teaching faculty and all staff select no

### Exception Time

Are you submitting this exception time as a faculty member?

What is the reason for the exception?

Is there an account index code?

Who is your approving supervisor?

The drop down for the reason for the exception reporting has 6 options, select the appropriate option (if Grant is not chosen, the Grant name field will not appear).

### Exception Time

Are you submitting this exception time as a faculty member? \* -- Choose -- ▾

What is the reason for the exception? \* -- Choose -- ▾

Is there an account index code? \* -- Choose -- ▾

Who is your approving supervisor?

First Name: \*

Last Name: \*

Email: \*

\*Please use @star.lcc.edu email address

If the staff person has not been assigned an index code, the correct FOAPAL will need to be entered. All COVID-19 will enter Fund 110001 and Activity Code COVID19. The Organization, Account, and Program will be the employee's default codes (questions regarding your default code can be direct to Payroll, FPAR, or the Controller).

### Exception Time

Are you submitting this exception time as a faculty member? \* No ▾

What is the reason for the exception? \* BCI ▾

Is there an account index code? \* No ▾

Please enter the FOAPAL: **Required Elements** **Optional Elements**

Fund	Organization	Account	Program	Activity	Location
*123456	*123456	*61XX	*123456	Option	Option

2 - 6 Digits

Must be 6 Digits

Must be 4 Digits and will always start with 61

Must be 6 Digits

These are option and will be provided to you if required

Complete the table with the hours that should be reported as Exception time. Be as descriptive as possible.

**Exception Time Entry**

Enter last **Saturday** of the pay period:

\*11/16/2019

\*A table with the full two week pay period will appear when you enter a date.

Date	Description of Work	Hours Worked	Supervisor Notes	Adjust (+/-)	Hours Adjusted
11/03/2019					0.00
11/04/2019					0.00
11/05/2019					0.00
11/06/2019	Interpreter for student X0000000	2.5			2.50
11/07/2019	MNJTP - Farm Bureau training	4.0			4.00
11/08/2019	Mechatronics lab	3.0			3.00
11/09/2019					0.00
11/10/2019					0.00
11/11/2019	Curriculum Dev - FIRE	8.0			8.00
11/12/2019					0.00
11/13/2019					0.00
11/14/2019					0.00
11/15/2019					0.00
11/16/2019					0.00
<b>Total Hours Worked:</b>		17.50		<b>Total:</b>	17.50
					<b>Hours Adjusted</b>

Complete the reason for the exception time. Hours entered here should reflect hours entered on the timesheet. If time was missed on the timesheet, please note that in the comment section

Please enter any comments regarding this form that need to be communicated to your supervisor, the timekeeper, or the grants office.

11/6/19 student at Livingston Center

Any additional notes for the supervisor or for additional documentation purposes are input here

**Employee Section** (You must sign below and then scroll down and click the "Submit Form" button)

I certify that the information entered on the Exception Reporting Log represents a true and accurate record of my work.

(click to sign)

Employee Signature

Date

Click to input electronic signature

The electronic signature box will pop up – type in your name in the boxes as it appears under the boxes and click Sign Electronically

**Sign electronically** ✕

Please read the Disclosure / Consent before you sign your form electronically.

Typing your name exactly as it appears below signifies you are completing this form using an electronic signature. By signing electronically, you are certifying that you have read and understand the Disclosure/Consent and agree to electronically sign. You also agree to receive required disclosures or other communications related to this transaction electronically.

To continue with the electronic signature process, please enter your name and click the "Sign Electronically" button to save your information and submit your electronic signature.

Lisa

Mazure

If you would like to opt out of electronic signature, please click the "Opt out and print" link below to save your information and print a local copy for your signature.

Opt out and print

Click on submit to send the form and create a workflow notifying your supervisor of a completed form. You may also save the progress of your form if you fill it out on a basis other than at the time timesheets and exception reporting is due. If you save progress, you can go back in and continue to work on the form.

**Timekeeper Section**

I certify that the exception time has been entered into the Banner time system.

\*

...3731333130

Barbara Farr

Timekeeper Signature

12/18/2019, 1:43 PM

Date

Need help? Contact [Help Services](#) or [Grants](#).



3. Supervisor Reviews and Approved the form:

Supervisor will receive an email notifying of a form – click on the link to open the form (if not signed into myLCC, the link will first open the single sign-on page, once signed in, the dynamic form page will open.)

Reply Reply All Forward IM

Wed 12/18/2019 1:30 PM

forms@lcc.edu

**LCC Forms: Exception Reporting Log requires your approval**

To  pratt6@lcc.edu

You are receiving this e-mail because Barbara Farr has submitted a Exception Reporting Log that requires your approval. Please click the link below to complete and electronically sign using Dynamic Forms. If you have additional questions regarding this request, please contact Barbara Farr.

[Click here to complete your section of the form.](#)

Thank you for your prompt attention,  
FS Grants Department

PLEASE NOTE: This message was automatically generated. Please do not respond to this email address. It is used only by an automated system and is not monitored for responses.

Click on the Complete This Form button



 LANSING  
COMMUNITY  
COLLEGE

 LCC - Grants

## Welcome to Dynamic Forms

Let's get started, Lisa.

The Exception Reporting Log form needs to be completed.

 [Complete This Form](#) 

You can check back here anytime to view your Pending / Draft Forms and review your completed Forms History.

Thank you for using Dynamic Forms!

Review the Exception Time elements – if any elements are incorrect the form will need to be rejected with a message of why the form is being rejected.

**Employee Information**

Employee First Name	Employee Last Name	Employee User Name	Employee Email	Employee Banner ID
*Barbara	*Farr	*farrb	*farrb@star.lcc.edu	*X00018808

**Instructions**

- Data entry must be completed on this form electronically.
- Enter data on form below based on bi-weekly pay schedule.
- Once the form is completed scroll down and click "Submit Form" to send it to your supervisor.
- Supervisor must sign and date form electronically and click "Submit Form".

**Exception Time**

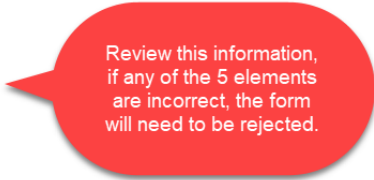
Are you submitting this exception time as a faculty member? \*No

What is the reason for the exception? \*Grant

If Grant, enter the grant name: \*FY20 Perkins

Is there an account index code? \*Yes

If Yes, please enter the account index code: \*G#####



Who is your approving supervisor?

First Name: \*Lisa *\*Please use formal legal first name and only capitalize first letter.*

Last Name: \*Mazure *\*Please use formal legal last name and only capitalize first letter.*

Email: \*pratt6@star.lcc.edu *\*Please use @star.lcc.edu email address.*

If the form needs to be rejected, scroll to the bottom and click reject. An email form will appear that will allow you to direct a message to the employee of what will need to be corrected.

Review of the detailed table entries. The table entries are expected to match the timesheet entries, however, there are times when corrections are needed. Adjustments are entered and explained.

**Exception Time Entry**

Enter last **Saturday** of the pay period: \*11/16/2019 *\*A table with the full two week pay period will appear when you enter a date.*

Date	Description of Work	Hours Worked	Supervisor Notes	Adjust (+/-)	Hours Adjusted
11/03/2019					0.00
11/04/2019					0.00
11/05/2019					0.00
11/06/2019	Interpreter for student X0000000	2.5	Appointment was only 2 hours	-5	2.00
11/07/2019	MNJTP - Farm Bureau training	4.0			4.00
11/08/2019	Mechatronics lab	3.0	Lab was open 4 hours	1	4.00
11/09/2019					0.00
11/10/2019					0.00
11/11/2019	Curriculum Dev - FIRE	8.0	Not on timesheet, but valid-needs labor redistribution		8.00
11/12/2019					0.00
11/13/2019					0.00
11/14/2019					0.00
11/15/2019					0.00
11/16/2019					0.00
<b>Total Hours Worked:</b>		17.50		<b>Total:</b>	18.00

Supervisor inputs any notes for days that need adjustment and inputs the proper adjusted amount. Time Sheet Adjustments are NOT needed for these. Upon review of the adjustments, Grants Accounting will process labor redistributions to ensure payroll hours charged to individual funds align with exception time hours. Hours Adjusted and Total Hours Adjusted will auto calculate based on the input of negative or positive adjustments entered in the Adjust column. Negative adjustments must include the "-" negative sign (see blue highlight).

**Hours Adjusted**

Supervisor inputs notes, as needed, and electronically signs.

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**Supervisor Section**

Notes:

Approved with necessary adjustments noted above.

Input an notes as needed.

I certify that I have reviewed the above information, made any required notations, made any necessary record changes on the employee's time sheet in banner, and certify the record is now accurate.

\*

...3037393038

*Lisa Mazure*

Supervisor Signature

12/18/2019, 1:37 PM

Date

I certify that the exception time has been entered into the Banner time system.

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Need help? Contact [Help Services](#) or [Grants](#).

Save Progress

Reject

Submit Form

Click to Submit Form