



NEW YORK STATE TEACHERS' RETIREMENT SYSTEM
10 Corporate Woods Drive, Albany, NY 12211-2395

OFFICE SERVICES ONLY

LEAVES OF ABSENCE REPORT
SCHOOL YEAR ENDING JUNE 30, _____

Please list all Teachers' Retirement System members who were on a leave of absence at PART PAY.
Do not include any members who were on a leave of absence at full pay or without pay.

The following descriptions are provided for clarification:

Percent at Part Pay - The percentage paid during the leave period. If the percentage of partial pay fluctuated during the year, please provide separate entries for each leave percentage. Earnings at Part Pay - The cumulative total of salary paid for the leave. Days at Part Pay - The cumulative total of days paid for the leave. Leave Begin Date - The first date member was placed on partial pay. Leave End Dates - The last date member was paid at part pay. If the member returned to a full pay status, please provide that information also.

EmpID	Name	Leave Type*	Percent at Part Pay	Earnings at Part Pay	Days at Part Pay	Leave Begin/End Dates	Comments

*Leave Type: 1 = Sabbatical; 2 = Sick/Maternity Leave; 4 = Military Leave

Authorized Signature	Title
Location Name	Location Code

* If the leave period extends past June 30 of one school year and continues into the next school year beginning July 1, a second QTR-96 must be submitted for that second year.