



Date:

RE: Manager Self Service Delegation Form

---

This memorandum requests the delegation of responsibilities pertaining to the approval of my employees' payable time through the Manager Self Service function. The University's Manager Self Service policy permits approvers to assign approval authority to a "delegate" to approve employee time. Final approval of all delegates rests with the Associate Vice Chancellor for Administration and Finance or her designee.

**Who Can Be A Delegate?**

- The delegate will have unrestricted access to your employee's time sheet in order to approve on your behalf.
- The delegate must be another manager or supervisor with similar rank and authority in managing department approvals.
- The most senior academic administrator may be delegated this authority by a department chair to approve the payable time of a chair's direct reports.
- No manager or supervisor, or a delegate, may approve his or her own time. In the case where a department chair has delegated his or her approval, the approval authority of that designated academic administrator's time may be delegated to the executive assistant for the department chair (\*\*please see the secondary delegate signature line below).

**The delegate assumes all responsibility and accountability for the compliance of a department's payroll in accordance with UMMS policy.**

Please complete the information below to appoint a delegate to approve on your behalf. Forward the form via email to the payroll department at [PayrollUMMS@UMassMed.edu](mailto:PayrollUMMS@UMassMed.edu) for processing. Confirmation of final approval will be provided back to you through an executed copy of this request. All questions regarding this policy should be addressed to [PayrollUMMS@UMassMed.edu](mailto:PayrollUMMS@UMassMed.edu).

Home Dept ID: \_\_\_\_\_

Manager/Supervisor: \_\_\_\_\_  
**Print Name** Title Date

Manager/Supervisor: \_\_\_\_\_  
Signature

Delegate: \_\_\_\_\_  
**Print Name** Title Date

Delegate: \_\_\_\_\_  
Signature

\*\*Delegate: \_\_\_\_\_  
**Print Name** Title Date

\*\*Delegate: \_\_\_\_\_  
Signature

Approval: \_\_\_\_\_  
Assoc VC Admin & Finance or Delegate Date