

Often times, it is necessary for a TEL document to be reprocessed in order to add/delete information or reallocate submitted time.

 $\begin{array}{l} \textbf{UAB TEL} \rightarrow \textbf{TEL} \\ \textbf{UAB HR Officer} \rightarrow \textbf{Biweekly Timesheets} \rightarrow \textbf{TEL} \\ \textbf{UAB Timekeeper} \rightarrow \textbf{Biweekly Timesheets} \rightarrow \textbf{TEL} \end{array}$

Select Reprocess.

<mark>o</mark> te	EL : Form 🔅																888985 <mark>7</mark>	⊼ ×
Ass	signment # <mark>1</mark>	234567	[)ist # <mark>6</mark>			Docum	ent # <mark>48</mark>	97016		S	ubmit Date	15-	MAR-	2016			
Person Example, Employee						Doc	Document Status COMPLETE						Reprocessed					
	Job Title 🛛	DMIN SUPPO	ort spi	ECIALI	ST	Docu	Document Reason DATA ENTRY											
Or	Organization 311401800 Med - Preventive Medicine Reporting Method TEL																	
Asg Category 01 Regular FT Requestor Example, Employee																		
Effe	Effective Date 13-DEC-2015																	
	Balances:	Vacation	174.04		Sick	96.84	Pe	rsonal Ho	oliday	0.00		Work & Benefit Hrs Total 80.00						
W	Costing	Element	,	SUN	MON	TUE	WED	THU	FRI	SAT	Total	Amount	Е	Ρ	Rep	roces	s Date	
E		Vork A-WK1				8.00	8.00	8.00	8.00		32.00							
E K		ick-WK1			8.00						8.00							d,
																	;	
O N	Work & B	enefit Hours		0.00	8.00	8.00	8.00	8.00	8.00	0.00	40.00			(OT Pren	n	0.00	
Е	Impact of	Reprocess											ļ		Othe	r 🔄	0.00	
w	Costing	Element		SUN	MON	TUE	WED	THU	FRI	SAT	Total	Amount	. E	Ρ	Rep	roces	s Date	
E		ad Weather	WK				2.50				2.50							
E K		Vork A-WK2	_		8.00	8.00	5.50	8.00			29.50							4
		loliday-WK2							8.00		8.00					_		
T W	Work & B	enefit Hours		0.00	8.00	8.00	8.00	8.00	8.00	0.00	40.00			(OT Pren	n	0.00	
0	Impact of	Reprocess											ļ		Othe	r 📃	0.00	
Comments											5							
	Open	Reprocess	6	Save		Submi		ActionLo	g	Reassign	Labor S	ources		~~	<	>	>> *	

NOTE: The DOCUMENT STATUS changes to Open and the DOCUMENT REASON changes to Reprocess.

NOTE: Because the time has been paid (denoted by a vin the box under "P") as it was originally submitted, the new information must be entered on new lines.

Press the *down arrow* on your keyboard to access another line.

On the next line, select *Sick – WK1 element* and subtract (-) the hour that should not have been charged to the employee's Sick accrual.

TEL:Form 1000000000000000000000000000000000000																
Ass	signment #	1234567	Dist # 🧃	5		Docum	ent # <mark>48</mark>	97016		s	Submit Date 23-DEC-2015					
Person Example, Employee						ument S	R	Reprocessed 1								
	Job Title	ADMIN SUPPOR	RT SPECIALI	ST	Docu	iment Re										
Or	Organization 311401800 Med - Preventive Medicine Reporting Method TEL															
Asg Category 01 Regular FT Requestor Boyd, Cecelia Wilson																
Effe	Effective Date 13-DEC-2015 – 26-DEC-2015 December 15, 2015 Active Assignment															
	= Balances	: Vacation 1	74.04	Sick	96.84	Pe	rsonal H	oliday	0.00		Work &	& Benefit Hrs Total 80.00				
w	Costing	Element	SUN	MON	TUE	WED	THU	FRI	SAT	Total	Amount	Е	Р	Reproc	ess Date	
E	– I [l	Nork A-WK1			8.00	8.00	8.00	8.00		32.00						
K	- I	Sick-WK1		8.00						8.00						
		Sick-WK1		-8.00						-8.00						
O N	Work & E	Benefit Hours	0.00	8.00	8.00	8.00	8.00	8.00	0.00	40.00			O.	T Prem	0.00	
E	Impact of	Reprocess												Other	0.00	
w	Costing	Element	SUN	MON	TUE	WED	THU	FRI	SAT	Total	Amount	E	Р	Reproc	ess Date	
E		Bad Weather-W	ΙК			2.50				2.50						
Ь		Nork A-WK2		8.00	8.00	5.50	8.00			29.50						
		Holiday-WK2						8.00		8.00			V			
T W	Work & E	Benefit Hours	0.00	8.00	8.00	8.00	8.00	8.00	0.00	40.00			0	T Prem	0.00	
0	Impact of	Reprocess										J		Other	0.00	
Com	ments												Ĵ	Ali Ld Ld	Comments	
	Open	Reprocess	Save		Submit	t i	ActionLo	g	Reassig	n Labor S	ources		<<	< >	>> *	

Press the *down arrow* on your keyboard to access another line.

On the next line, select *Away W/Pay-WK1* from the Element list of values and report the hours to be charged against this element.

Note that **Comments** are required for use of this element selection. Select **OK**.



Effe	ective Date <mark>1</mark>	3-DEC-2015	- 26-D	EC-2015											
Balances: Vacation 174.04 Sick 96.84					Personal Holiday			0.00		Work 8	& Benefit Hrs Total 80.00				
W	Costing	Element	SUN	MON	TUE	WED	THU	FRI	SAT	Total	Amount			Reproc	ess Date
E		ick-WK1		8.00						8.00			✓		
E		iick-WK1		-8.00						-8.00					
	□ [<mark>A</mark>	way W/Pay-Wł	۲	8.00						8.00					
O N	Work & B	enefit Hours	0.00	8.00	8.00	8.00	8.00	8.00	0.00	40.00			C	T Prem	0.00
Е	Impact of I	Reprocess										ļ		Other	
w	Costing	Element	SUN	MON	TUE	WED	THU	FRI	SAT	Total	Amount			Reproc	ess Date
Е		ad Weather-W	ĸ			2.50				2.50					
E		Vork A-WK2		8.00	8.00	5.50	8.00			29.50					
		loliday-WK2						8.00		8.00					
T W	Work & B	enefit Hours	0.00	8.00	8.00	8.00	8.00	8.00	0.00	40.00			C	T Prem	0.00
0	Impact of I	Reprocess										ļ		Other	0.00
Comments Approved time away with pay.											Comments				
	Open	Reprocess	Save		Submi	t	ActionLo	og 🛛	Reassign	h Labor S	ources		<<	< >	>> *

Once the information is correct, click Save

							 _				
Open	Reprocess	Save	Submit	ActionLog	Reassign	Labor Sources	<	<	>	>>	*

The TEL document is updated and the **IMPACT OF REPROCESS** is completed according to the new entries.

O TEL :	Form													०००००० ज ×		
Assignment # 1234567 Dist # 6						Docum	ent # <mark>48</mark>	97016		s	Submit Date 23-DEC-2015					
Person Example, Employee						ument S	tatus <mark>O</mark> F	PEN		R	Reprocessed 1					
	Job Title	ADMIN SUPPOR	RT SPECIALI	ST	Docu	iment Re	ason <mark>RE</mark>	PROCE	SS							
Orga	nization	311401800 Med	- Preventive	Medicin	Rep	orting Me	ethod TE	L								
Asg C	ategory	01 Regular FT				Requestor Boyd, Cecelia Wilson										
Effecti	Effective Date 13-DEC-2015															
E	Balance	s: Vacation 1	74.04	Sick	96.84	Pe	rsonal H	oliday 📘	0.00		Work &	Benefit H	rs Total	80.00		
W	Costing	Element	SUN	MON	TUE	WED	THU	FRI	SAT	Total	Amount	ΕP	Reproce	ess Date		
E		Sick-WK1		8.00						8.00						
E		Sick-WK1		-8.00						-8.00			15-MAR-3	2016		
		Away W/Pay-W	К1	8.00						8.00			15-MAR-	2016 🚽 🚽		
N N	Work &	Benefit Hours	0.00	8.00	8.00	8.00	8.00	8.00	0.00	40.00			OT Prem	0.00		
E	Impact c	of Reprocess	0.00	0.00	8.00	8.00	8.00	8.00	0.00	32.00	0.00		Other	8.00		
w	Costing	Element	SUN	MON	TUE	WED	THU	FRI	SAT	Total	Amount	ЕΡ	Reproce	ess Date		
		Bad Weather-W	/K			2.50				2.50						
E		Work A-WK2		8.00	8.00	5.50	8.00			28.50						
		Holiday-WK2						8.00		8.00				J		
T,	Work &	Benefit Hours	0.00	8.00	8.00	8.00	8.00	9.00	0.00	40.00			OT Prem 📕	0.00		
0	Impact o	of Reprocess											Other	0.00		
Comme	ents <mark>App</mark>	proved time awa	y with pay.		/							Ð	All LD LD	Comments		
	Open	Reprocess	Save		Submi	t	ActionLo	og	Reassig	n Labor S	ources	~	< >	>> *		

Use the scroll bar to see additional entries.

Select Submit



The DECISION box will appear. If the information is correct, select Yes.



The document enters workflow.

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