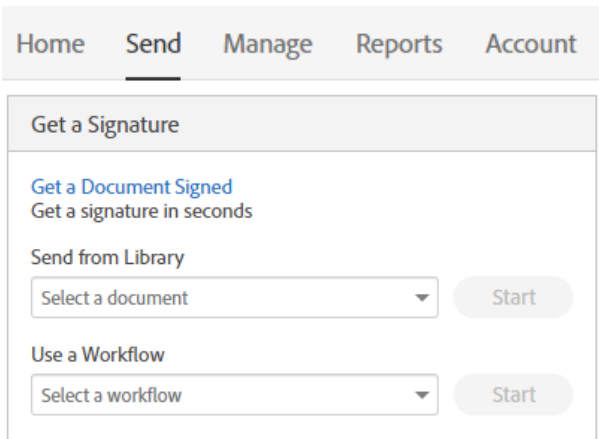


Create a Document for Signature

1. Click “Get a Document Signed” or the “Send” tab on the menu.



Home **Send** Manage Reports Account

Get a Signature

[Get a Document Signed](#)
Get a signature in seconds

Send from Library
Select a document

Use a Workflow
Select a workflow

2. Enter all recipient(s) email address(es) who will need to sign the document.
 - a. **You must use the LEA email address (jdoe@lamar.edu), you cannot use firstname.lastname@lamar.edu**
 - b. Click “Add Me” if you also need to sign the document




Recipients

Complete in Order Complete in Any Order [Add Me](#) [Add Recipient Group](#) [?](#)

| | |
|---|--|
| 1 | <input type="text" value="Enter recipient email"/> |
|---|--|

[Show CC](#)

3. Enter a message. You can change the “Agreement Name” and add a message with instructions for the recipients.

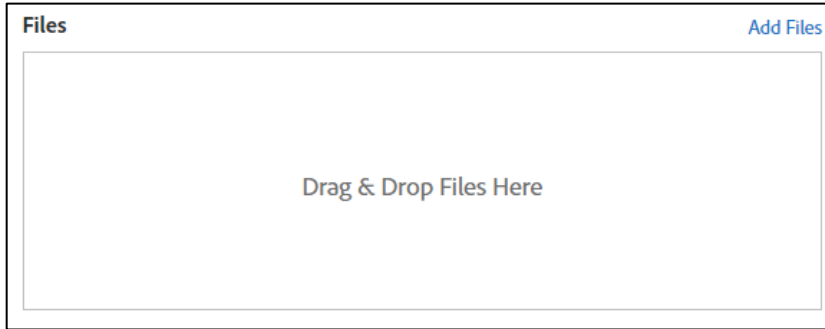


Message

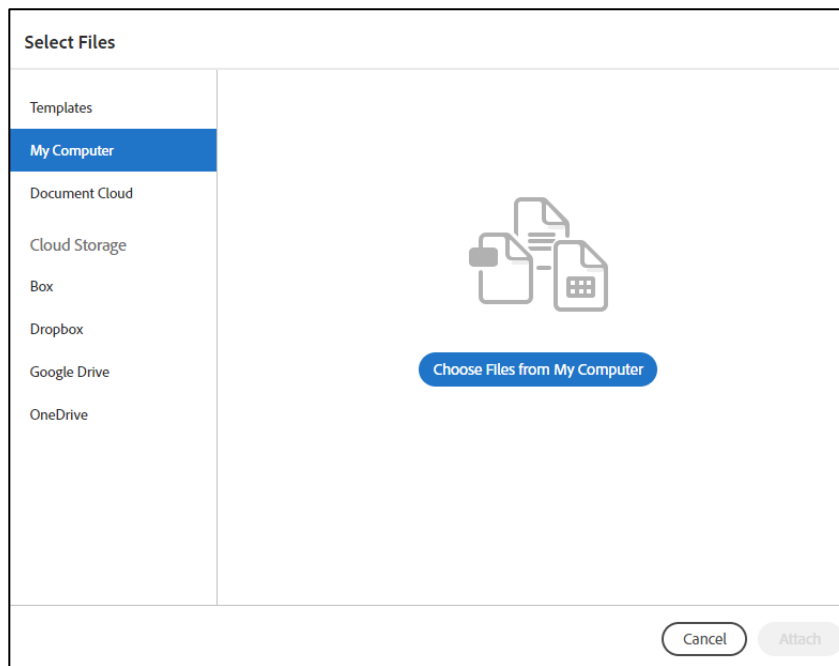
Agreement Name

Please review and complete this document.

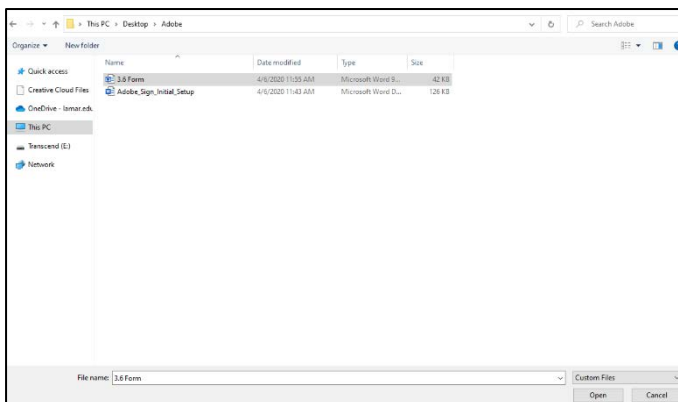
4. Click “Add Files” to select the file(s) you want signed.



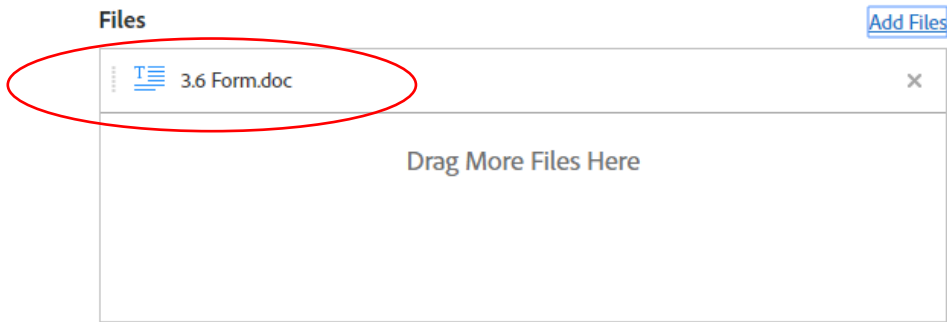
5. Click “Choose Files from My Computer”.



6. Select the document(s) you want signed.
 - a. Click “Open”

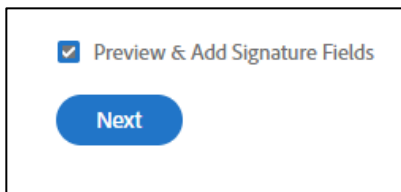


7. The file has now been attached for signing.

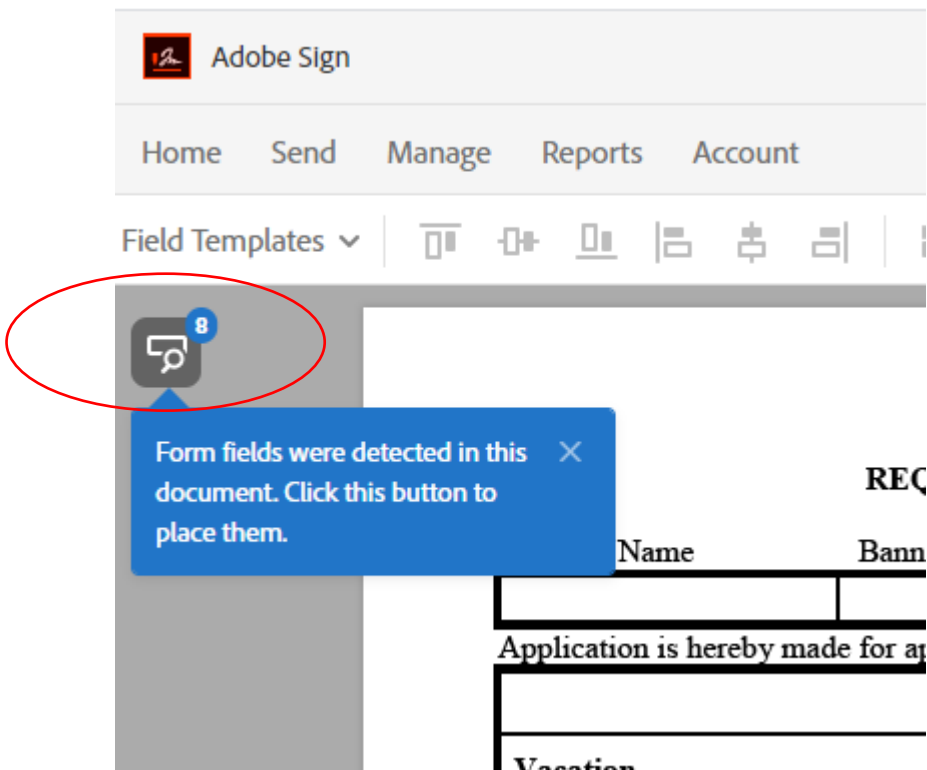


8. Select the checkbox "Preview & Add Signature Fields".

a. Click Next



9. The document is processed and Adobe Sign will detect "fillable" form fields. You can have Adobe Sign automatically place the fields for you on the document(s) by clicking this button.



10. Fields will be placed on the form and are highlighted in yellow.
- You can remove field(s) by selecting them and pressing Delete on your keyboard

LAMAR UNIVERSITY F3.6A
REQUEST FOR OVERTIME AND LEAVE

| Name | Banner ID# | Title | Department |
|------|------------|-------|------------|
| | | | |

Application is hereby made for approval of leave for the following reason(s) and period(s).

| | Date(s) | Total Hours |
|--|---------|-------------|
| Vacation | | |
| Sick (1) <input checked="" type="radio"/> Self <input type="radio"/> Family | | |
| Compensatory Time Taken State FLSA <small>(Circle One - See Back For Details)</small> | | |
| Overtime Earned State FLSA <small>(Circle One - See Back For Details)</small> | | |
| Bereavement (2) | | |
| Emergency (3) | | |
| Military / Maternity | | |
| Jury Duty (Attach Summons) | | |
| Leave Without Pay (Attach Justification) | | |

- Sick: Nature of Illness _____
Report must be submitted day after return. Scheduled appointments must be submitted for approval prior to appointment. A revision must be submitted if estimated time was more or less than expected. A doctors statement must be attached for absences of more than 3 consecutive working days.
- The death of my _____ occurred _____
(Relationship) (Name) (Date)
- Nature of emergency leave requested _____

I hereby certify that the above information is true and correct.

Employee Signature _____ Date _____ Supervisor Signature/Date _____
___ Approved ___ Disapproved

NOTE: Absence/overtime request must be completed for each occurrence.
Overtime must be approved in advance by Department Head/Director.
Vacation must be submitted and approved in advance.

COPIES: Original to be retained in the Department for the current year plus 3 years.
A copy will be given to the employee.

REVISED: BT 1/23/01 DO NOT SEND THIS FORM TO HUMAN RESOURCES

11. You can also use the Fields pane to the right to manually place fields on the document that you want your recipients to fill out.
- There are five categories of fields available as below

Signature Fields ▾

Signer Info Fields ▾

Data Fields ▾

More Fields ▾

Transaction Fields ▾

12. Add a Signature field by using the Signature Fields section. Click “Signature” then drag and drop it on the document where you want the signature to be placed.

I hereby certify that the above information is true and correct.


| | |
|--------------------|------------------------------|
| * Signature | * Signature |
| Employee Signature | Supervisor Signature/Date |
| Date | ___ Approved ___ Disapproved |


NOTE: Absence/overtime request must be completed for each occurrence.
Overtime must be approved in advance by Department Head/Director.
Vacation must be submitted and approved in advance.


COPIES: Original to be retained in the Department for the current year plus 3 years.
A copy will be given to the employee.

REVISED: BT 1/23/01 DO NOT SEND THIS FORM TO HUMAN RESOURCES


13. Double-Click the Signature field to open the field’s properties.
- Select the recipient who will sign from the “Assigned to” drop-down list
 - Click “OK”


Signature 1 

Assigned To: Donna Lively (dlively@lamar.ed) 

Field Type: Signature 

Required

Conditions 

Tools 

[Delete Field](#)

14. Click the “Send” button to send the document(s) for signature. Each recipient will receive an email and instructions to sign the document(s). Once all recipients have signed you will receive an email with the completed document.

[Reset Fields](#)