

TROUP COUNTY SCHOOL SYSTEM

REQUEST FOR FAMILY AND MEDICAL LEAVE

CERTIFICATION/DOCUMENTATION EMPLOYEE/EMPLOYER IDENTIFICATION

PHONE: 706-812-7900

100 North Davis Road, Building C, LaGrange, GA 30241

FAX: 706-845-4380

(Last Name) (First Name) (Middle Name) (Last 4 of Social Security #)

(Street Address) (City/State) (Zip Code)

Signature: Employee ID#:

Job Title: Location: Date:

Family Leave is available to qualifying employees for the purpose of childbirth, adoption or foster care placement, care of the employee's child, spouse, parent or spouse's parent; for personal disability; military qualifying exigency leave; and military caregiver leave. See attached TCBOE Policy *GARH*.

I am requesting Family Leave from: to:

I am requesting my previously approved Family Leave be extended through:

I am requesting Family Leave for the following reason: (check one):

- Birth of a child: Name of Mother: _____
- Adoption/Foster Care Placement: Child's Name: _____
Date of Placement: _____ (Attach Documentation of Birth, Adoption or Foster Care)
- Personal Disability
- Care of Family Member: Name: _____
Relationship: _____ Child _____ Parent _____ Spouse _____ Spouse's Parent

MILITARY LEAVE

- Care for injured or ill military family member (Up to a total of 26 weeks with medical documentation)
- Qualifying Exigency Leave (Up to 12 weeks with military orders and/or other supporting documentation)

Employer's Response

Employee is qualified for requested leave under the Family Medical Leave Act

Employee is not qualified for requested leave under the Family Medical Leave Act because:

- Employee has not been employed for the qualifying previous 12-months
- Employee has not worked the required 1250 hours during the previous 12-months
- Employee has already used the annual allotment of Family Leave

Date Signature of Supervisor Approved Modified Denied

Date Signature of Chief Human Resource Officer Approved Modified* Denied

(*Reason for Modification:)

TROUP COUNTY SCHOOL SYSTEM

(CONTINUED ON PAGE -2-) FMLA LEAVE CERTIFICATION FORMS

BIRTH OF A CHILD

Expected delivery date: _____ Your doctor must sign the Health Care Provider Information at the bottom of this form. Family Medical Leave is **unpaid** leave. However, you may choose to use any accumulated sick leave you have earned during the six weeks following childbirth. The usual and customary recovery time is six weeks after the delivery date. **After the six weeks, you will be placed on unpaid FMLA** (even if you have unused sick leave days) unless a detailed letter from your physician documents why you are not physically able to return to work. ***Employee must have physician complete a Fitness-For-Duty Report form or a signed release when cleared to return to work without restrictions.**

CARE OF FAMILY MEMBER

Name of Family Member: _____ Date(s) Employee's presence will be required for care of family member: Beginning Date: _____ Ending Date: _____ Describe the serious health condition of family member. Attach additional page(s), if necessary.

_____ The doctor must sign the Health Care Provider Information at the bottom of this form.

EMPLOYEE ILLNESS/DISABILITY

Employee Name: _____ Describe the serious health condition that makes the employee unable to perform the essential function of his/her employment. (Attach additional page(s) if necessary) _____

Date Disability Commenced: _____ **Probable Duration or Ending Date:** _____

The doctor must sign the Health Care Provider Information at the bottom of this form.

***Employee must have physician complete a Fitness-For-Duty Report form or a signed release when cleared to return to work without restrictions.**

HEALTH CARE PROVIDER INFORMATION

Physician's Name: _____ Business Name: _____

Phone Number: _____ License Number: _____

Address: _____

Date: _____ Signature of Health Care Provider: _____

ADOPTION / FOSTER CARE PLACEMENT

~~Attach Documentation of Birth, Adoption or Foster Care to this Request for Family and Medical Leave form.

MILITARY LEAVE

~~**Caregiver Leave:** Attach copy of required medical documentation for injured or ill military family member.

~~**Qualifying Exigency Leave:** Attach copy of Active Duty Orders or other military documentation.

TROUP COUNTY SCHOOL SYSTEM

Human Resource Office
100 North Davis Road, Building C
LaGrange, Georgia 30241

PHONE: 706-812-7900

FAX#: 706-845-4380

FITNESS-FOR-DUTY REPORT

NOTE: Please return the completed form to the Human Resource Office at the above address or FAX a copy to 706-845-4380 when the doctor releases you to resume your job duties.

| EMPLOYEE INFORMATION | |
|------------------------|--------------|
| Employee Name | |
| Employee ID# | |
| Social Security Number | XXX-XX-_____ |
| Job Title | |
| Location | |

| MATERNITY LEAVE CERTIFICATION | |
|--|------------|
| The individual's delivery date was _____. This is to attest that the individual named above is certified to be "Fit For Duty" and is physically able to return to work without any restrictions on _____. (The usual and customary leave for any delivery is 6 weeks.) | |
| Signature of Health Care Provider _____ | Date _____ |

| OTHER MEDICAL LEAVE CERTIFICATION | |
|---|------------|
| This is to attest that the individual named above is certified to be "Fit For Duty" and is physically able to return to work without any restrictions on _____. | |
| Signature of Health Care Provider _____ | Date _____ |

| PHYSICIAN/HEALTH CARE PROVIDER INFORMATION | |
|--|--|
| Physician/Health Care Provider Name: | |
| Business Name: | |
| Address: | |
| Phone Number: | |

Policy
Employee Leaves and Absences

Descriptor Code: GARH

This policy shall apply to all benefits-eligible employees of the Troup County Board of Education ("the Board"). All employees are required to follow the appropriate work calendar established for their positions and may take leave from work only in accordance with this policy or other leave policies enacted by the Board. Deductions in pay will be made for absences not covered under this policy.

Employees are allowed to be absent from school without loss of pay on account of sick leave, maternity leave, adoption leave, personal and professional leave, bereavement leave, annual leave, jury and witness leave, military leave, and sabbatical/graduate study leave.

Sick Leave

Employees are entitled to adequate provisions for sick leave. Annual sick leave with pay are accrued at the rate of one and one-quarter days (1 ¼ days) for each month worked. The following chart reflects the number of days earned by employee categories.

| Number of Days Worked | Number of Sick Days |
|---------------------------|---------------------|
| 9 months (>189 days) | 11 ¼ |
| 10 months (190-219 days) | 12 ½ |
| 11 months (220 -239 days) | 13 ¾ |
| 12 months (240 days) | 15 |

Sick leave may be utilized in the event that an employee is unable to perform his duties because of personal or family illness or disability. In accordance with state law, this leave policy affords an opportunity for an individual to be absent from duties without penalty in salary for

1. Personal illness or injury
2. Absence necessitated by exposure to contagious disease
3. Absence due to illness or death in the employee's immediate family

An employee may request use of sick leave only in the case of personal illness or illness of immediate family. Members of the immediate family are defined as:

1. Spouse
2. Parents, step-parents, or spouses parents (in-laws)
3. Children (biological, step-children, adopted, legal guardianship, or foster)
4. Grandparents or spouses grandparents

5. Grandchildren
6. Son/Daughter-in-law
7. Siblings, step-siblings, or spouses siblings
8. Any relative living in the residence of the employee

Sick leave is advanced to employees at the beginning of each fiscal year provided the employee reports for duty on the first scheduled work day or if the employee has a sick leave balance on the first scheduled work day. Otherwise, appropriate sick leave is credited upon return to work.

Accumulation: Unused sick leave may be accumulated to a total of one hundred twenty (120) days, effective June 30, 2008. No retroactive accumulations to this date will be allowed. Personal leave days may not be accumulated.

Break In Service: Accumulated sick leave from prior service with Troup County School System may be applied if the break in service did not exceed twelve (12) months. Any personnel who forfeit accumulated sick leave under the break in service policy may request reinstatement after returning to work for a period of two consecutive years. A written request for reinstatement should be sent to the Payroll Office.

Spousal Donations: Pursuant to OCGA § 20-2-850, an employee of Troup County School System may donate up to ten (10) sick leave days annually to his or her spouse if such spouse is also an employee of the Troup County School System for purposes of maternity leave, illness, illness of a family member, or death of a family member.

Transfers from Outside Agencies: Accumulated sick leave may be transferred from other public schools or Georgia state agencies, up to 45 days accumulation mandated by State Law, based upon written notice from the prior employer. Break in service rules will also apply to transfers from outside agencies.

Transfer: Teachers and other professional employees will be allowed sick leave transfer only as provided by state law.

Deductions: For any sick leave in an amount above that which is allowed by policy, there shall be a deduction equal to one day's salary for each day of sick leave (or the appropriate percentage of the day's salary) made from the employee's salary.

Removal from State Payroll Requisition: Removal from and re-entry to the state payroll requisition of a teacher because of extended absence shall be done in accordance with State Department of Education requirements.

MATERNITY LEAVE

A leave of absence for maternity reasons shall be granted to a teacher as follows:

A teacher who is pregnant shall be entitled to leave of absence to begin at a time to be determined by the teacher, the physician and the local school Superintendent between the commencement of pregnancy and the anticipated date of delivery. Said teacher shall notify the Superintendent in writing of her desire to take such leave, and except in case of emergency, shall give such notice at least 30 calendar days prior to the date on which her leave is to begin. This notice shall include a doctor's statement of anticipated date of physical disability. The teacher may continue in active employment as late into her pregnancy as she desires provided she is able to properly perform the required functions of her job. Final

leave shall be required to pay the cost of employing a substitute to serve during his or her absence for such leave. Employees who serve on juries or who are subpoenaed to attend a judicial proceeding may retain any jury/witness pay they receive.

MILITARY LEAVE

All employees of the Board of Education are entitled to paid leave not to exceed eighteen days in any one federal fiscal year for the purpose of complying with ordered military leave duty with the armed forces of the United States or State of Georgia, including duty as a voluntary member of the militia or reserve component of the United States or State of Georgia. Employees also are entitled to leave not exceeding thirty days in any one federal fiscal year if ordered to duty as a result of the declaration of any emergency by the governor or the appropriate officials of the United States armed forces. Employees who have military commitments shall inform the Superintendent or designee annually and shall cooperate to the extent possible in scheduling such leave so as to minimize the disruption in those employees' duties and the mission of the Board of Education.

An eligible employee may take up to 12 weeks of FMLA leave while the employee's spouse, son, daughter, or parent (covered service-member) is on active duty or call to active duty status for a "qualifying exigency." The regulations clarify that exigency leave applies only to members of the Reserves and National Guard components serving in support of a contingency operation and certain retired members, but not the Regular Armed Forces. Furthermore, a call to active duty for a qualifying exigency refers to a federal call to active duty, not a state call, unless the President or Congress declares a national emergency.

Regarding certification of the need for exigency leave, upon the first request, the employer may require the employee to provide only once a copy of active duty orders or other military documentation. The orders or military documentation can be required again if an exigency arises out of a different call for the same or a different military member.

The second type of military family leave entitles an eligible employee to take up to 26 weeks of "caregiver leave" to care for covered service-member with a serious injury or illness during a "single 12 month period," with additional details provided in the sample policy. Caregiver leave is on a "per-covered service-member, per-injury" basis. An employee can take more than one period of 26 weeks if it is for a different service-member or a subsequent injury to the same service-member. The unused portion of 26 weeks during a "single 12 month period" is forfeited. Any combination of other FMLA leave with the 26 weeks for service-member care is limited to 26 weeks.

Military caregiver leave may be used to care for current members of the Armed Forces, including the National Guard or Reserves, or those on the temporary disability retired list from such groups, who are undergoing treatment or therapy for a serious illness or injury incurred in the line of active duty or those otherwise on outpatient status or on the temporary disability retired list. Military caregiver leave is not available to care for former members of such groups or those on the permanent disability retired list.

An employee is an eligible caregiver if he or she is the spouse, son, daughter, parent or next of kin of a service-member.

When leave is taken to care for a service-member, the employee will obtain a certification completed by the service-member's authorized health care provider, which may include health care providers from any of the following agencies: DOD, the Department of Veterans Affairs (VA) or the DOD TRICARE (military health system) network. An employer may seek authentication and/or clarification of a medical certification, but may not seek second or third opinions or re-certification for caregiver leave, although the employer may require the

employee to provide confirmation of the covered family relationship to the seriously injured or ill military member.

SABBATICAL/GRADUATE STUDY

A teacher with three or more years of acceptable service with the Troup County School System may be granted a leave of absence without pay for one year for full-time graduate study. If no acceptable replacement can be found, leave of absence will not be granted. The teacher may return to the same or an equivalent position that is available at the conclusion of the sabbatical. The teacher must notify the Human Resources Department in writing by March 1st of the following year as to his/her intention to return as an employee of the school system for the next school year

OBSERVANCE OF RELIGIOUS HOLIDAYS

Employees may use personal leave for the observance of recognized religious holidays. If an employee desires to take leave for the observance of recognized religious holidays in excess of the days allowed for personal leave, the employee may take unpaid leave for such purposes provided that such leave is not excessive and does not interfere with fulfilling the obligations of his or her job.

FAMILY & MEDICAL LEAVE ACT

It is the purpose of this policy to set out in summary form the provisions of the Family and Medical Leave Act ("the Act" or "FMLA") and its implementing regulations. The Board of Education ("Board") does not intend by this policy to create any additional rights to leave not provided by the Act; provided however, the Board does wish to extend the rights of the Act to certain employees who have worked at least 12 months for the Board. The Board does intend to elect certain options as the Act Authorizes. Any portion of this policy inconsistent or contrary to the Act is unintentional and shall not be given effect. As to the interpretation of this policy, the Board's employees should look to the Act itself and its regulations.

ELIGIBLE EMPLOYEES

Employees of the Troup County Board of Education who have been employed for 12 months or more and who worked at least 1250 hours during that time, are entitled to 12 weeks of unpaid leave per year (defined as the previous 365 days) in connection with:

1. the birth and first year care of a child;
2. the adoption or foster parent placement of a child;
3. the illness of an employee's spouse, child, or parent with respect to serious health condition, defined as one that requires in-patient care in a hospital, hospice or residential medical care facility, or which requires continuing treatment by a health care provider; or
4. the employee's own illness.
5. military caregiver leave; or
6. military qualifying exigency leave

In the instance of a birth, adoption and foster placement, the entitlement for child-care ends after (1) the child reaches the age of 1 year, or (2) 12 months after the adoption or placement.

Entitlement for leave associated with illness of a child occurs only where the child is under 18 years of age or incapable of self-care due to mental or physical disability.

AMOUNT OF LEAVE AVAILABLE

In cases where both spouses are employed by the Troup County Board of Education, the combined amount of leave for child birth, adoption, or to care for a sick parent is limited to 12 weeks.

The unpaid medical and family leave provided under this policy includes and extends up to 12 weeks the period of sick and/or personal leave provided under other policies of the Troup County Board of Education. However, an employee is not eligible for unpaid leave under this policy until any paid leave provided to the employee under other Board policies has been exhausted.

NOTIFICATION OF ANTICIPATED LEAVE

Except where circumstances are such that reasonable advance planning is not possible, employees must provide the Office of the Superintendent at least 30 days notice of the date when leave is to begin. With respect to foreseeable family or employee illness, the employee shall make reasonable effort to schedule treatment - including intermittent and reduced hour leave - so as not to disrupt unduly the operations of the school district, subject to approval of the employee's or family member's health care provider.

BENEFITS

Benefits accrued by the employee (except for sick leave accumulation) before leave is taken will not be altered by the employee's absence under this policy. The employee is entitled to continuation of health benefits during the leave period. Upon return, the employee is entitled to restoration to an equivalent position with equivalent pay, benefits, and conditions of employment.

If an employee fails to return to work after the leave period has expired, the Board of Education may recover health benefits premium expenditures extended to the employee during the leave period.

REQUIRED CERTIFICATION

The Board of Education requires that a request for leave be supported by a certification issued by the appropriate health care provider of the eligible employee or of the son, daughter, spouse, or parent of the employee.

The certification shall include (1) the date that the condition commenced, (2) the duration, (3) the necessity for the employee's leave, and (4) the employee's inability to perform his/her job functions. The Board of Education reserves the right, at its own expense, to designate a second health care provider (other than a school district employee) to provide a second opinion. A third such opinion, should it be necessary, shall be binding.

Upon the employee's return to work, the school district may require the employee to provide certification by his/her health care provider that the employee is able to resume work.

SPECIAL PROVISIONS

If an employee begins leave under this policy within three weeks before the end of the academic term and the duration of the leave is greater than five working days, the Board of Education may require the employee to continue to take leave until the end of the term.

The Board of Education may deny coverage under this policy to an employee whose salary is in the highest 10% of the employees employed by the school district if such denial is necessary to prevent substantial and grievous economic injury to the District's operations.

The Superintendent shall make, keep, and preserve records showing compliance with the Family and Medical Leave Act and in accordance with the Fair Labor Standards Act of 1938 and federal regulations.

Troup County Schools

Date Adopted: 4/21/2011
Last Revised: 7/21/2016

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| <p>Troup County Board of Education Long-Term Medical Leave</p> |
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An employee who works at least 20 hours per week and is unable to continue working due to physical disability, as verified by his/her physician, may request a **12-month medical leave without pay** when all sick leave and annual leave have been exhausted. To maintain health insurance, the employee will be responsible for paying his/her portion of the State Health Insurance premium. The Troup County Board of Education will continue to pay the Group Life Insurance for the employee. The employee can continue all other payroll deducted benefits as long as the employee bears the cost of the premiums.

The request for leave should be submitted in writing to the Human Resources Department. The Payroll/Benefits Department will then be notified.

The long-term leave will terminate when the physician verifies that the employee is able to return to work or when the 12-month leave has expired.

Should you have questions, contact either the Payroll/Benefits or Human Resources Department at 706-812-7900.

EMPLOYEE RIGHTS AND RESPONSIBILITIES UNDER THE FAMILY AND MEDICAL LEAVE ACT

Basic Leave Entitlement

FMLA requires covered employers to provide up to 12 weeks of unpaid, job-protected leave to eligible employees for the following reasons:

- for incapacity due to pregnancy, prenatal medical care or child birth;
- to care for the employee's child after birth, or placement for adoption or foster care;
- to care for the employee's spouse, son, daughter or parent, who has a serious health condition; or
- for a serious health condition that makes the employee unable to perform the employee's job.

Military Family Leave Entitlements

Eligible employees whose spouse, son, daughter or parent is on covered active duty or call to covered active duty status may use their 12-week leave entitlement to address certain qualifying exigencies. Qualifying exigencies may include attending certain military events, arranging for alternative childcare, addressing certain financial and legal arrangements, attending certain counseling sessions, and attending post-deployment reintegration briefings.

FMLA also includes a special leave entitlement that permits eligible employees to take up to 26 weeks of leave to care for a covered servicemember during a single 12-month period. A covered servicemember is: (1) a current member of the Armed Forces, including a member of the National Guard or Reserves, who is undergoing medical treatment, recuperation or therapy, is otherwise in outpatient status, or is otherwise on the temporary disability retired list, for a serious injury or illness*; or (2) a veteran who was discharged or released under conditions other than dishonorable at any time during the five-year period prior to the first date the eligible employee takes FMLA leave to care for the covered veteran, and who is undergoing medical treatment, recuperation, or therapy for a serious injury or illness.*

***The FMLA definitions of "serious injury or illness" for current servicemembers and veterans are distinct from the FMLA definition of "serious health condition".**

Benefits and Protections

During FMLA leave, the employer must maintain the employee's health coverage under any "group health plan" on the same terms as if the employee had continued to work. Upon return from FMLA leave, most employees must be restored to their original or equivalent positions with equivalent pay, benefits, and other employment terms.

Use of FMLA leave cannot result in the loss of any employment benefit that accrued prior to the start of an employee's leave.

Eligibility Requirements

Employees are eligible if they have worked for a covered employer for at least 12 months, have 1,250 hours of service in the previous 12 months*, and if at least 50 employees are employed by the employer within 75 miles.

***Special hours of service eligibility requirements apply to airline flight crew employees.**

Definition of Serious Health Condition

A serious health condition is an illness, injury, impairment, or physical or mental condition that involves either an overnight stay in a medical care facility, or continuing treatment by a health care provider for a condition that either prevents the employee from performing the functions of the employee's job, or prevents the qualified family member from participating in school or other daily activities.

Subject to certain conditions, the continuing treatment requirement may be met by a period of incapacity of more than 3 consecutive calendar days combined with at least two visits to a health care provider or one visit and

a regimen of continuing treatment, or incapacity due to pregnancy, or incapacity due to a chronic condition. Other conditions may meet the definition of continuing treatment.

Use of Leave

An employee does not need to use this leave entitlement in one block. Leave can be taken intermittently or on a reduced leave schedule when medically necessary. Employees must make reasonable efforts to schedule leave for planned medical treatment so as not to unduly disrupt the employer's operations. Leave due to qualifying exigencies may also be taken on an intermittent basis.

Substitution of Paid Leave for Unpaid Leave

Employees may choose or employers may require use of accrued paid leave while taking FMLA leave. In order to use paid leave for FMLA leave, employees must comply with the employer's normal paid leave policies.

Employee Responsibilities

Employees must provide 30 days advance notice of the need to take FMLA leave when the need is foreseeable. When 30 days notice is not possible, the employee must provide notice as soon as practicable and generally must comply with an employer's normal call-in procedures.

Employees must provide sufficient information for the employer to determine if the leave may qualify for FMLA protection and the anticipated timing and duration of the leave. Sufficient information may include that the employee is unable to perform job functions, the family member is unable to perform daily activities, the need for hospitalization or continuing treatment by a health care provider, or circumstances supporting the need for military family leave. Employees also must inform the employer if the requested leave is for a reason for which FMLA leave was previously taken or certified. Employees also may be required to provide a certification and periodic recertification supporting the need for leave.

Employer Responsibilities

Covered employers must inform employees requesting leave whether they are eligible under FMLA. If they are, the notice must specify any additional information required as well as the employees' rights and responsibilities. If they are not eligible, the employer must provide a reason for the ineligibility.

Covered employers must inform employees if leave will be designated as FMLA-protected and the amount of leave counted against the employee's leave entitlement. If the employer determines that the leave is not FMLA-protected, the employer must notify the employee.

Unlawful Acts by Employers

FMLA makes it unlawful for any employer to:

- interfere with, restrain, or deny the exercise of any right provided under FMLA; and
- discharge or discriminate against any person for opposing any practice made unlawful by FMLA or for involvement in any proceeding under or relating to FMLA.

Enforcement

An employee may file a complaint with the U.S. Department of Labor or may bring a private lawsuit against an employer.

FMLA does not affect any Federal or State law prohibiting discrimination, or supersede any State or local law or collective bargaining agreement which provides greater family or medical leave rights.

FMLA section 109 (29 U.S.C. § 2619) requires FMLA covered employers to post the text of this notice. Regulation 29 C.F.R. § 825.300(a) may require additional disclosures.



For additional information:
1-866-4US-WAGE (1-866-487-9243) TTY: 1-877-889-5627
WWW.WAGEHOUR.DOL.GOV

U.S. Department of Labor | Wage and Hour Division



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