

FMLA Employee Request Form

To request leave on the basis of the Family and Medical Leave of Act (FMLA), please complete the following request form and submit to Human Talent at least 30 days prior to leave (unless leave is unforeseen, in which case submit the form as soon as practical).

Employee Name (print clearly): _____ Employee #: _____

Requested Leave Start Date: _____ Estimated End Date: _____

The reason for this FMLA leave request is (select the most appropriate box):

- Birth of a son or daughter and to care for the newborn child.
- Placement with the employee of a son or daughter for adoption or foster care.
- To care for the employee's spouse, son, daughter or parent with a serious health condition.
- A serious health condition that makes the employee unable to perform the functions of the employee's job.
- A qualifying exigency arising out of the fact that the employee's spouse, son, daughter or parent is a military member on covered active duty (or has been notified of an impending call or order to covered active duty status).
- To care for a covered servicemember with a serious injury or illness if the employee is the spouse, son, daughter, parent or next of kin of the covered servicemember.

Time off work is expected to be (select the most appropriate box):

- For a continuous block of time (several continuous days, weeks, or months off work).
- On an intermittent basis (periodic time off that is not usually expected to be the same days or time off from week to week; examples may be time off for flare-ups of a medical condition and/or for ongoing medical treatment/appointments).

Additional information about employee FMLA rights and responsibilities will be provided on page 2.

Determination of eligibility for leave under the FMLA, and/or additional documentation or clarification of documentation, may be required prior to making a final FMLA determination to approve or deny an FMLA leave request. Please contact Tanya Tondre, Human Talent Coordinator, with any questions.

Employee Signature: _____ Date: _____

For HR use ONLY: Date received: _____ FMLA Eligibility Notice sent: _____

FMLA Eligibility & Rights

To (or "In general") be eligible for FMLA an employee must have worked for at least 12 months and have worked at least 1,250 hours in the 12 months preceding the leave. If an employee is eligible for FMLA they have the right to take up to 12 weeks or 60 intermittent days of leave during their work calendar year.

NOTE: For exceptions and further information, see the campus/facility poster "Employee Rights and Responsibilities under the Family Medical Leave Act" and Board Policy DECA (Legal) and DECA (Local) in the Employee Handbook.

If you do not qualify for FMLA contact Tanya Tondre in Human Talent to discuss other leave options that may be available to you.

Employee Responsibilities & Rights

- The employee is to immediately review Board Policy DECA (Legal) and DECA (Local) in the Employee Handbook for further information regarding leave taken using the Family Medical Leave Act.
- The employee should also immediately review the campus/facility poster "Employee Rights and Responsibilities under the Family Medical Leave Act". Contact your campus principal or department director if you cannot locate the posting.
- You are to complete Section II of the CERTIFICATION FORM prior to giving it to your health care provider.
- You are required to submit this form (Employee Request for Family Medical Leave (FMLA) to Human Talent as soon as possible. **All other forms are to be submitted to Human Talent within 15 working days.** Please contact Tanya Tondre in Human Talent if for any reason you are unable to submit all forms within 15 working days. Failure to provide a complete and sufficient medical certification within 15 days may result in a denial of your FMLA request.
- You must keep in contact with Human Talent.
- Returning to work from an Employee's Serious Health Condition:
 - The employee will not be permitted to return to work without prior approval from Human Talent. Human Talent will review the Physician's medical release and contact the employee's supervisor concerning the employee's eligibility to return to work.
 - An employee seeking to return to work after leave because of his or her own serious illness or the birth of a child must provide Human Talent with a medical release from their health care provider **3 working days prior to returning to work.**
- Returning to work from CARING FOR A FAMILY MEMBER:
 - You will not be permitted to return to work without prior approval from Human Talent.
 - If you do not notify Human Talent within 3 working days prior to returning to work, you will be requested to return home.

You are to immediately notify Human Talent, Principal/Director, Payroll and Benefits of any changes.