



# Paid Parental Leave Form

GCPS employees may be eligible for Paid Parental Leave (PPL) for qualifying life events. Employees must have worked six continuous months in a board approved position and worked 700 hours within the timeframe. Such paid parental leave shall be equally available to all eligible employees.

The maximum amount of paid parental leave that may be taken by an eligible employee during a rolling 12-month period is 240 hours (30 workdays), regardless of the number of qualifying events that occur within such period. Such leave may be used increments or in blocks of time. PPL must be used within 12 months of the qualifying event.

## Employee Information

Employee Name: \_\_\_\_\_ Employee ID: \_\_\_\_\_

Employee Contact Number: \_\_\_\_\_ Location: \_\_\_\_\_

I understand that verification/certification from a certified healthcare provider or facility, the Division of Family & Children Services (DFCS), and/or an attorney addressing my reason for the leave request must be submitted to the Division of Human Resources. Recommended documents include:

- Confirmation/Verification of birth; or
- Legal documents from an attorney of DFCS regarding the adoption/placement of a foster child

I understand that falsification of information may lead to disciplinary actions, up to and including termination of employment.

Select one: \_\_\_\_\_ **Birth** \_\_\_\_\_ **Adoption** \_\_\_\_\_ **Placement** **Date of event:** \_\_\_\_\_

### **How would you like to use PPL? (Select only one option):**

**You may only use sick leave for 6 weeks, following birth/adoption/placement.**

1. \_\_\_\_\_ Use PPL after accrued leave. I would like to use \_\_\_\_\_ days of PPL (max 30 days) during my leave.
2. \_\_\_\_\_ Apply PPL the first 30 days of leave, and no sick time is being used.
3. \_\_\_\_\_ Apply \_\_\_\_\_ days of PPL and \_\_\_\_\_ days of sick time.
4. \_\_\_\_\_ You can save your PPL for when you return to work and use it as needed, during the 12 months following the event date.

**The PPL form and supporting documentation must be submitted together for the request to be reviewed.**

**Submit your completed form and supporting documentation to [Leave@gcpsk12.org](mailto:Leave@gcpsk12.org) or fax to 678-301-6111. All correspondence regarding the time requested will be communicated electronically.**

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date