

BEREAVEMENT LEAVE FORM

Complete this form and submit it to your supervisor.

All bereavement leave must be at the time of death, when memorial services are held, settlement of estate. These days do not have to be taken on consecutive days.

A funeral home statement must be submitted to be eligible for compensation.

Date Filed: _____

Date of Funeral: _____

Employee's Name: _____

Employee Number: _____

Deceased Name: _____

(Please Print)

Calendar Dates Requested: _____

Funeral Location (Include City and State): _____

Deceased Relationship to Employee: (Please circle the relationship in one of the boxes below.)

A maximum of 5 days allowed for absence due to death of:

Father	Mother	Step-Father	Step-Mother	Brother	Sister	Spouse	Child	Step Child
Mother-in-law	Father-in-law	Son-in-law	Daughter-in-law	Brother-in-law	Sister-in-law			

Grandparents Grandchild and others residing in the same household of absent employee.

A maximum of 2 days allowed for absence due to death of any other blood relative, such as:

First Cousin	Aunt	Uncle	Niece	Nephew	Grandparents in-law
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A maximum of 3 days of accumulated sick leave to attend funerals or other memorial services or other memorial services not covered by sections A or B.

Employee Signature

10/03

Distribute copies to: Human Resources (white) Payroll Employee's Supervisor Employee