



How to Submit Supporting Leave Documents

1. Go to **TalentEd Records** (records.nsd.org). Use your employee credentials.
2. In the left-hand menu, click **Available Forms**.
3. Select **Leave of Absence: Supporting Documents 2025-26 SY**.

The screenshot shows the 'Available Forms' page in the TalentEd Records system. The page has a search bar at the top and a grid of form icons below. The 'Leave of Absence - Supporting Documents 2025-26 SY' form is highlighted with a red circle. The left-hand menu also has 'Available Forms' circled in red.

4. Answer the question by **checking the box**.

The screenshot shows the 'Leave of Absence - Supporting Documents 2025-26 SY' form. The form contains the following sections:

- Instructions:** "If you haven't submitted your Leave of Absence Request, STOP here and go to this link and complete the application electronically first: [LOA APPLICATION](#)"
- Step 1 - Download the required form:**
 - Certification of Health Care Provider for Employee's Serious Health Condition -> [CLICK HERE](#)
 - Certification of Health Care Provider for Family Member's Serious Health Condition -> [CLICK HERE](#)
 - Medical Professional Authorization for Employee to receive Shared Leave Donations -> [CLICK HERE](#)
- Step 2 - Upload:** Submit the completed and signed document(s) as an attachment here.
- Employee ID:**
- Have you submitted your Leave of Absence Application?** I acknowledge and certify that I have submitted the Leave of Absence application.
- Attachments:**
 - Application to Receive Shared Leave Donations: [Upload a file](#)
 - Health Care Provider Certification: [Upload a file](#)
 - Other Types of Supporting Documents: [Upload a file](#)
- Please Click to View/Hide the Workflow:**
 - Current User:
 - Date:
- Buttons:** Close, Print, Print as PDF, Save Draft, Save Final

5. Upload **the Supporting Documents** by clicking **Upload a file** and click **SAVE FINAL**.



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Certification of Health Care Provider for Family Member's Serious Health Condition --> [CLICK HERE](#)

Medical Professional Authorization for Employee to receive Shared Leave Donations --> [CLICK HERE](#)

Step 2 - Upload

Submit the completed and signed document(s) as an attachment here.

Employee ID (required)

Have you submitted your Leave of Absence Application? (required)

If you haven't submitted your Leave of Absence Request, STOP here and go to this link and complete the application electronically first: -->[LOA APPLICATION](#)

 I acknowledge and certify that I have submitted the Leave of Absence application.

Attachments

Application to Receive Shared Leave Donations

[Upload a file](#)

Health Care Provider Certification

[Upload a file](#)

Other Types of Supporting Documents

[Upload a file](#)

Please Click to View/Hide the Workflow

Current User

Date

[Close](#)

[Print](#)

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