



NORTHWESTERN UNIVERSITY

Staff Leave of Absence Provisions and Application Forms

Leave of Absence

Individuals covered	<p>Anyone who has a regular employment relationship with the University and meets the eligibility requirements has entitlements under the Family and Medical Leave Act of 1993. This policy describes these and other leave benefits available to members of the University administrative and research staff.</p>
Policy	<p>Northwestern University grants leaves of absence for medical care for oneself, for maternity or other family care, for some personal reasons, and for military duty. With a leave of absence, an individual may under some circumstances temporarily leave a University position with an intention to return to active university employment and during the leave maintain a relationship with the University that provides access to certain benefits and does not break service.</p>
Kinds of Leave	<p>The following pages describe the provisions for six kinds of leave of absence available from the university:</p> <p>Medical leave is absence to care for a personal serious health condition, such as identified on the back of the Health Certification form that follows this policy statement.</p> <p>Maternity leave is absence for a woman following the birth of her child.</p> <p>Family care leave is absence for the adoption of a child, or for a father of a newborn child, or for placement of a child in foster care, or for a serious health condition affecting a spouse, parent, child, or declared same-sex domestic partner.</p> <p>Personal leave is absence taken for personal development related to University employment, for research, for travel, for seeking re-employment after involuntary separation as through staff reduction, or after the expiration of leave for personal medical or family care.</p> <p>Military training leave is absence for military reserve training.</p> <p>Military active duty leave is absence for active military service for employees who enlist or are inducted into the armed forces of the United States.</p>
Benefits during leave	<p>Insured benefits. During leaves of absence, insured benefits are available. The payment of premiums varies among the kinds of leave as described on the following pages.</p> <p>Retirement contributions. University contributions to the individual's retirement accounts continue as a percent of the University salary paid during the leave, such as for vacation or holiday pay, but these contributions are not made when the individual receives income from insurance benefits. Employees on unpaid leave may make their own contributions directly to the retirement plan without the University matching funds.</p> <p>Paid time benefits. Vacation and sick time continue to accrue while paid vacation is being taken and during University scheduled and personal floating holidays. Vacation and sick time do not accrue during the time when an individual is receiving paid sick time benefits or during unpaid leave.</p> <p>Sick time already accrued when a leave begins is held until the individual returns to work to the extent that it is not used during a medical or family care leave.</p>

Confirmation from the
Department of Human
Resources

A leave of absence is approved upon the confirmation received by the staff member from the Department of Human Resources, even though the start date of the leave might precede the receipt of the confirmation.

End of the leave

A leave of absence ends upon resuming active employment, whether at the University or another employer.

An employee on leave of absence who takes temporary work at the University within six months of the start of a leave has returned to regular, benefits-eligible employment, having already qualified for benefits under ERISA; and the leave of absence ends. An employee on leave of absence who takes temporary work at the University after six months from the start of the leave becomes a temporary employee not eligible for benefits under ERISA, even though the person continues to have access to University benefits programs as may be provided by the leave of absence.

On taking a benefits-eligible position at another employer, a leave of absence ends and the individual is separated from the University.

Medical Leave of Absence

Purpose	Medical leave is absence to care for a personal serious health condition, such as identified on the back of the Health Certification to be completed by the individual's health care provider.
Eligibility	<p>Service. One continuous year of service is required for an individual to take medical leave of absence.</p> <p>Hours. In the 12 months prior to the leave, the individual must have worked at least 1250 hours.</p>
Provisions	<p>Holding the job. The job is held for up to 12 weeks in any 12 month period. In the case of intermittent leave or a reduced work schedule, the job is held for the time equivalent of 12 weeks of the employee's work schedule. If paid time is accrued beyond 12 weeks, whether as sick time or vacation, the job is held for the duration of the paid time. If department operations permit, the employing department may hold the job beyond 12 weeks or beyond the duration of paid sick time.</p> <p>Extended medical leave. For personal medical conditions preventing work for beyond 12 weeks of medical leave with holding of the job, medical leave is available <i>at large</i>, renewable in 3 month increments up to a total leave of a year, including the initial 12 weeks, without holding the job and without assurance of return to University employment. The employing department may hold the job during this time if operations permit.</p> <p>Pay. Paid sick time, vacation, and personal floating holidays are used at the start of the leave. When these accruals are exhausted, unpaid absence follows for the remainder of the leave. The leave starts at the beginning of the absence, whether paid or unpaid.</p> <p>Insured benefits. An individual on medical leave may continue insured benefits by paying the employee contribution to the insurance premiums. The University continues to pay the employer contribution during a medical leave.</p>
Application procedure	<p>Application. The leave application is obtainable at the end of this policy statement, from the Department of Human Resources, from a school's business office, or on line at www.northwestern.edu/hr. It is completed by the employee, given to the supervisor for approval, and forwarded to Human Resources. Thirty days notice is needed except in emergencies. The Benefits Division notifies the employee about benefits availability</p> <p>Certification. A health care provider's certification of personal illness must be submitted to the supervisor within two weeks of the request for leave.</p> <p>Approval. The employee's supervisor approves payment of paid sick time, the holding of the job as needed, and a recommendation for the leave. Confirmation by the Department of Human Resources is required to begin the leave.</p>
End of the leave	<p>Return to work. The employee reports to work at the end of the leave if the position was held. Upon returning to work after an absence of 15 or more working days, the employee is required to submit a physician's statement about ability to return. A department may require such a statement after a shorter period of absence. An employee may apply for a new University job if the leave is <i>at large</i>.</p> <p>Extension. A 3-month extension of personal medical leave beyond 12 weeks can be requested two weeks prior to expiration. The department may hold the job beyond the initial 12 weeks if department operations permit.</p>

Maternity Leave of Absence

Purpose	<p>Maternity leave is absence by a pregnant employee for the birth of her child. Leave of absence for other child care needs is Family Care Leave of Absence, described on the pages following Maternity Leave.</p>
Eligibility	<p>Service. One continuous year of service is required for an individual to take a leave of absence for maternity.</p> <p>Hours. In the 12 months prior to the leave, the individual must have worked at least 1250 hours.</p>
Provisions	<p>Holding the job. The job is held for up to 12 weeks following the birth of the child. In the case of intermittent leave or leave taken through a reduced work schedule, the job may be held for the equivalent of 12 weeks of the employee's scheduled hours, if medically necessary. The employing department may continue the absence beyond 12 weeks through a personal leave, as provided in the policy on personal leaves of absence, including the holding of the job if the department operations permit. After the period of holding the job, the individual may apply for a personal leave <i>at large</i>, during which a job is not held and after which there is no guarantee of employment.</p> <p>Pay. The new mother may use up to six weeks of accrued paid sick time following the birth of her child. In addition, the employee may use accrued vacation for income during the maternity leave. Participants in the short term disability insurance plan are eligible for benefits from that plan to the extent that a certified disability prevents return to work after accrued sick time is paid. Information on this benefit is found in documentation for the short term disability insurance plan.</p> <p>Insured benefits. An individual on a maternity leave may continue insured benefits by paying the employee contribution. The University continues to pay the employer contribution during a family care leave.</p>
Application procedure	<p>Application. The leave application is obtainable from the Department of Human Resources or a school's business office. It is completed by the employee, given to the supervisor for approval, and forwarded to Human Resources. Thirty days notice is needed except in emergencies. The Benefits Division notifies the employee about benefits availability.</p> <p>Certification. Certification is not needed for a maternity leave or to draw paid time of up to six weeks from accrued sick time, but certification is needed to receive sick time pay outside of the six weeks available following delivery. The certification is needed for disability prior to delivery or for sick pay for disability beyond six weeks following delivery.</p> <p>Approval. The employee's supervisor approves payment of paid sick time, the holding of the job as needed, and a recommendation for the leave. Confirmation by the Department of Human Resources is required to begin the leave.</p>
End of the leave	<p>Return to work. The employee reports to work as scheduled at the end of the leave if the position was held.</p> <p>Extension. The employing department may extend the leave and hold the job for 3 additional months if operations permit. An extension requires the confirmation of the Department of Human Resources.</p>

Family Care Leave of Absence

Purpose	Family care leave is absence for the birth or adoption of a child, for placement of a child in foster care, or for a serious health condition affecting a spouse, parent, or child.
Eligibility	Service. One continuous year of service is required for an individual to take a leave of absence for family care, Hours. In the 12 months prior to the leave, the individual must have worked at least 1250 hours.
Provisions	Holding the job. The job is held for up to 12 weeks in any 12 month period. In the case of intermittent leave or leave taken through a reduced work schedule, the job may be held for the time equivalent to 12 weeks of the employee's work schedule. The employing department may extend the leave and hold the job for 3 additional months if the department operations permit. After the period of holding the job, the individual may apply for a personal leave <i>at large</i> , during which a job is not held and after which there is no guarantee of employment. Pay. Up to 5 days of paid sick time for care of family members in the immediate household, followed by vacation and personal floating holidays are used at the start of the leave, followed by unpaid leave. Insured benefits. An individual on a family care leave may continue insured benefits by paying the employee contribution. The University continues to pay the employer contribution during a family care leave.
Application procedure	Application. The leave application is obtainable from the Department of Human Resources or a school's business office. It is completed by the employee, given to the supervisor for approval, and forwarded to Human Resources. Thirty days notice is needed except in emergencies. The Benefits Division notifies the employee about benefits availability. Certification. A health care provider's certification of a family member's need for the employee's care must be submitted to the supervisor by the employee within two weeks of the request for leave. Approval. The employee's supervisor approves payment of paid sick time, the holding of the job as needed, and a recommendation for the leave. Confirmation by the Department of Human Resources is required to begin the leave.
End of the leave	Return to work. The employee reports to work as scheduled at the end of the leave if the position was held. Extension. The employing department may extend the leave and hold the job for 3 additional months if operations permit. An extension requires the confirmation of the Department of Human Resources.

Personal Leave of Absence

Purpose	<p>Personal leave is absence taken for personal development related to University employment, for research, for travel, for seeking re-employment after involuntary separation as through staff reduction, or for continued medical or family care after the expiration of a medical or family care leave.</p>
Eligibility	<p>Service. One continuous year of service is required for an individual to take personal leave of absence.</p> <p>Standing. Good standing is required in order to qualify for a personal leave.</p> <p>Need. Personal leave is granted for personal development related to University employment, for research, for travel, or after involuntary separation from the University at no fault of the individual.</p>
Provisions	<p>Holding the job. If the employing department's operations permit, the department may hold the job for up to 3 months, and renew the holding of the job in three month increments to a maximum of one year of leave. If the department does not hold the job, the leave becomes <i>at large</i>, and it may be renewed with the Human Resources department up to a maximum of a year providing the reason for taking the leave continues. There is no guarantee of re-employment for an individual on leave <i>at large</i>.</p> <p>Staff reduction leave. A personal leave resulting from a University initiative and at no fault of the individual, such as a leave resulting from a staff reduction, can be extended quarterly to a maximum of one year of leave, although there is no holding of a job and no assurance of return to University employment.</p> <p>Pay. Personal leave starts with use of accrued vacation and personal floating holidays. No sick time is paid during personal leave. Accrued vacation and personal floating holidays have been paid, the leave continues as unpaid leave.</p> <p>Insured benefits. An individual on a personal leave can continue insured benefits by paying the full premium for the insurance, including the portion otherwise paid by the University.</p>
Application procedure	<p>Application. The leave application is obtainable from the Department of Human Resources or a school's business office. It is completed by the employee, given to the supervisor for approval, and forwarded to Human Resources. Thirty days notice is needed except in emergencies. The Benefits Division notifies the employee about benefits availability.</p> <p>Certification. A letter explaining of the purpose of the personal leave is to accompany the application, describing the travel, research, or program of self-development related to University employment to be undertaken during the leave.</p> <p>Approval. The employee's supervisor approves the payment of paid time benefits, the holding of the job, and a recommendation for the leave. Confirmation by the Department of Human Resources is required to begin the leave.</p>
End of the leave	<p>Return to work. The employee reports to work as scheduled at the end of the leave.</p> <p>Extension. Personal leave resulting from a University initiative at no fault of the individual, such as a staff reduction, makes the individual eligible to renew a personal leave quarterly to a maximum of one year, without assurance of return to University employment.</p>

Military Training Leave of Absence

Purpose	Military training leave is absence for military reserve training.
Eligibility	Service. Leave for military training is granted at any time during active employment. Military membership. Membership in the reserve or National Guard is required.
Provisions	Holding the job. The job is held for the duration of the leave. Pay. Employees receive their University pay for the leave period, less the amount of gross pay received from the federal or state governments. Insured benefits. Insured benefits continue in this absence during active employment. Premiums are paid by the individual and the University as during active employment.
Application procedure	Application. The employee is to inform the supervisor as far in advance as possible. Certification. A military voucher is needed by the payroll division to reimburse the difference in pay. Approval. The Department of Human Resources sends a letter to the employee regarding approval of the leave and its dates. The supervisor receives a copy.
End of the leave	Return to work. The employee reports to work after the scheduled training. Extension. Military training leave is limited to the duration of the training.

Military Active Duty Leave of Absence, continued

Purpose	Military active duty leave is absence for active military service for employees who enlist or are inducted in to the armed forces of the United States.
Eligibility	Service. Leave for active military service is granted at time during active employment. Call to duty. Military call-up or enlistment is required.
Provisions	Holding the job. The job may be filled during the absence, but the employee returning from active duty is entitled to be reinstated in the former job (possibly displacing a person in the job) or in a comparable job within <ul style="list-style-type: none"> • a period of 90 days after date of discharge or release from active military service • a period of 31 days after the date of release from six months of active duty training • a period of 90 days after release from hospitalization related to military service, provided this does not extend beyond the date of discharge by more than one year Pay. Accrued vacation and personal floating holidays may be paid at the beginning of the leave at the employee's request. Unused accruals are carried until return. Insured benefits. Insured benefits may continue if the employee pays the full premium.
Paid time benefits	The benefits for an employee granted a military leave of absence are affected as follows. Accrued vacation time. The enlisted or inducted employee is paid at the beginning of the leave for vacation time accrued prior to beginning military leave. The employee called up for active duty may elect to have the accrued vacation paid at the beginning of the leave or held as accrued until return to the job. Vacation time does not accrue while an employee is on military leave, but it restarts on return to work at the accrual rate based on University service, which includes service prior to the military leave plus the time on military leave. Accrued personal floating holidays. The enlisted or inducted employee is paid for personal floating holidays accrued prior to beginning military leave. The employee called up for active duty may elect to have the accrued personal floating holidays paid at the beginning of the leave or held as accrued until return to the job. Personal floating holidays do not accrue while an employee is on military leave, but on return to work they are earned at the rate appropriate to University service, which includes time on military leave. Accrued sick time. Accrued sick time is held as accrued and may be used when the employee returns from military leave. Sick time does not accrue while an employee is on military leave, but the accrual restarts with the time already credited when the leave began.

Military Active Duty Leave of Absence, continued

Benefit plans

Health, dental, group term life, optional term life, accidental death and dismemberment (AD&D) plans. The employee may continue coverage by paying the full premium directly to the benefits division. Call up for active duty is a change of employment status that qualifies for making changes of enrollment that may be needed by the employee. The individual should contact the Benefits Division within 31 days of the call-up to make any changes of coverage needed for the individual or for family members.

Flexible spending account (FSA). The employee may not make contributions to the FSA plan while on a military leave. However, an employee may seek reimbursement for services received while actively participating in the plan before the leave began.

Retirement plan. Individual contributions and University matching contributions stop while an employee is on military leave. The employee may make after-tax contributions directly to the investment company. On return from military leave to employment, the employee may have up to three times his or her length of service to a maximum of five years to make up contributions missed during the leave, and the employee receives the University's matching contribution for the made up contributions. No interest or earnings is due on the missed contributions.

Tuition. For purposes of the tuition benefit, continuous University service includes the service prior to the leave, the time during the military leave, and service after the leave, provided the full-time requirement is satisfied for the service periods prior to and following the military leave. Dependents receiving tuition benefits prior to a call-up may continue to receive those benefits during the leave of an employee called up for active duty through the completion of the term of study when the employee is called. Those called to active duty who seek continued eligibility for a dependent during their leave of absence may seek this eligibility through the provision in the tuition assistance plans calling for grant of the eligibility by the provost or the senior vice president for business and finance.

Procedure to begin military leave

Employee requests leave. The employee should complete the Application for Leave of Absence and give it to the supervisor who signs it and sends it to the school's or department's human resources representative in the Department of Human Resources. For induction or enlistment, evidence of the induction or enlistment date is to be attached to the leave application. For call-up to active duty, verbal or written notice of call to active duty is required even if the call to active duty does not allow time for completion of the leave application, but documentary evidence for the call up is not required

Department prepares Appointment Form. After a military leave is approved, the employing department sends an Appointment Form to the Payroll Division of the department of human resources, placing the employee on leave of absence with a return date one year from the leave date. The action code is LOA, with a reason code of MIL; and the compensation rate is zero. The appointment form should indicate the amount of vacation or personal floating holiday time to be paid at the start of the leave. The end date will prompt for a review of the leave status if the individual has not returned before the end of a year.

Military Active Duty Leave of Absence, continued

Return from military
Leave

An employee returning from military leave is reinstated to his or her former or a comparable position without losing seniority unless it is impossible or unreasonable for the University to reinstate him or her. The following conditions govern reinstatement.

Certification of discharge. The employee must have received from the military service a certificate of honorable discharge or discharge under honorable conditions or of satisfactory service.

Timely application. The employee applies for reinstatement at the campus employment office within the legal time limits, as stated in “Duration,” above.

Rate of pay. An employee reinstated to his or her former position receives the rate of pay in effect when the military leave began, plus any general increases granted for such classifications during the absence. An employee assigned to a higher-graded position receives the minimum rate for the new position or the former rate of pay plus any general increase for the previous classification, whichever is higher, plus the normal promotional increase that would be awarded for the promotion.

Return to work. The department contacts its human resources representative to arrange reinstatement in order to assure appropriate job assignment, pay rate, benefits enrollment, service accrual, and accrual plan for paid time off. The consultant updates HRIS with the information needed for the reinstatement.

Retention. After return from military leave, an employee must be retained for a period of not less than one year unless he or she is discharged for cause or on account of a layoff carried out in seniority order in accordance with a contract or established practice.

Return from training. An employee returning from the active duty for training in the reserve or national guard is to be retained under the same conditions as above for six months.

Evanston Campus Employees:
Human Resources
720 University Place
Evanston, IL 60208-1145
(847)467-2728 Phone
(847)491-5136 Fax

NORTHWESTERN UNIVERSITY
Certification Of Health Care Provider
(Family and Medical Leave Act of 1993)
Please print or type

Chicago Campus Employees:
Human Resources, Rm. 150
710 North Lake Shore Drive
Chicago, IL 60611-3008
(312)503-8481 Phone
(312)503-1741 Fax

1. EMPLOYEE'S NAME Last First Middle Initial

2. Patient's Name (if not the employee)

3. Please check the applicable category of **serious health condition** which requires a leave of absence from work.

"Serious health conditions" as defined by the Family & Medical Leave Act are described on the opposite side of this form.

- 1. Hospital Care
- 2. Absence Plus Treatment
- 3. Pregnancy
- 4. Chronic Conditions Requiring Treatments
- 5. Permanent/Long-term Conditions Requiring Supervision.
- 6. Multiple Treatments (Non-Chronic Conditions)

4. Describe the **medical facts** which support your certification, including a brief statement as to how the medical facts meet the criteria of one of these categories.

5. a. State the approximate **date** the condition commenced, and the **probable duration** of the condition (and also the probable duration of the patient's present **incapacity**² if different):

b. Will it be necessary for the employee to work only **intermittently or to work on a less than full schedule** as a result of the condition (including for treatment described in Item 6 below)?

Yes No If yes, give the probable duration and recommended schedule:

c. If the condition is a **chronic condition (#4)** or **pregnancy**, state whether the patient is presently incapacitated and the likely duration and frequency of **episodes of incapacity**:

6. a. If additional **treatments** will be required for the condition, provide an estimate of the probable number of such treatments: _____

If the patient will be absent from work or other daily activities because of treatment or an **intermittent or part-time** basis, also provide an estimate of the probable number of and interval between such treatments, actual or estimated dates of treatment if known, and period required for recovery if any:

b. If any of these treatments will be provided by **another provider of health services** (e.g., physical therapist), please state the nature of the treatments:

c. If a **regimen of continuing treatment** by the patient is required under your supervision, provide a general description of such regimen (e.g., prescription drugs, physical therapy requiring special equipment):

7. a. If medical leave is required for the employee's **absence from work** because of the **employee's own condition** (including absences due to pregnancy or a chronic condition), is the employee **able to perform work** of any kind? Yes No

b. If able to perform some work, is the employee **unable to perform any one or more of the essential functions of the employee's job** (the employee or the employer should supply you with information about the essential job functions)? Yes No

If yes, please list the essential functions the employee is unable to perform:

c. Is it necessary for the employee to be **absent from work for treatment**? Yes No

8. a. If leave is required to **care for a family member** of the employee with a serious health condition, **does the patient require assistance** for basic medical or personal needs or safety, or for transportation? Yes No

b. If no, would the employee's presence to provide **psychological comfort** be beneficial to the patient or assist in the patient's recovery?

Yes No

c. If the patient will need care only **intermittently** or on a part-time basis, please indicate the probable **duration** of this need:

Name of Health Care Provider (please print)
Address:

Signature
Type of Practice:

Date
Telephone number:

To be completed by the employee needing family leave to care for a family member:

State the care you will provide and an estimate of the time period during which care will be provided. Include a schedule, if leave is to be taken intermittently or if it will be necessary for you to work less than a full schedule:

This completed form must be submitted to Northwestern University with a completed leave of absence request form.

Employee signature:

Date:

"Incapacity," for purposes of FMLA, is defined to mean inability to work, attend school or perform other regular daily activities due to the serious health condition, treatment thereof, or recovery therefrom.

A "**Serious Health Condition**" means an illness, injury, impairment, or physical or mental condition that involves one of the following:

1. Hospital Care Inpatient care (i.e. an overnight stay) in a hospital, hospice, or residential medical care facility, including any period of incapacity or subsequent treatment in connection with or consequent to such inpatient care.
2. Absence Plus Treatment A period of incapacity of more than three consecutive calendar days (including any subsequent treatment or period of incapacity relating to the same condition), that also involves:
 - (1) **Treatment¹ two or more times** by a health care provider, by a nurse or physician's assistant under direct supervision of a health care provider, or by a provider of health care services (e.g. physical therapist) under orders of, or on referral by, a health care provider; or
 - (2) **Treatment** by a health care provider on at least one occasion which results in a **regimen of continuing treatment²** under the supervision of the health care provider.
3. Pregnancy Any period of incapacity due to **pregnancy** or for **prenatal care**.
4. Chronic Conditions Requiring Treatments A **chronic condition** which:
 - (1) Required **periodic visits** for treatment by a health care provider, or by a nurse or physician's assistant under direct supervision of a health care provider;
 - (2) Continues over an **extended period of time** (including recurring episodes of a single underlying condition); and
 - (3) May cause **episodic** rather than a continuing period of incapacity (e.g., asthma, diabetes, epilepsy, etc.)
5. Permanent/Long-term Conditions Requiring Supervision
A period of **incapacity** which is **permanent or long-term** due to a condition for which treatment may not be effective. The employee or family member must be **under the continuing supervision of, but need not be receiving active treatment by, a health care provider**. Examples include Alzheimer's, a severe stroke, or the terminal stages of a disease.
6. Multiple Treatments (Non-Chronic Conditions)
Any period of absence to receive **multiple treatments** (including any period of recovery therefrom) by a health care provider or by a provider of health care services under orders of, or on referral by, a health care provider, either for **restorative surgery** after an accident or other injury, or for a condition that **would likely result in a period of incapacity of more than three consecutive calendar days in the absence of medical intervention or treatment**, such as cancer (chemotherapy, radiation, etc.), severe arthritis (physical therapy), kidney disease (dialysis).

¹ Treatment includes examinations to determine if a serious health condition exists and evaluations of the condition. Treatment does not include routine physical examinations, eye examinations, or dental examinations.

² A regimen of continuing treatment includes, for example, a course of prescription medication (e.g., an antibiotic) or therapy requiring special equipment to resolve or alleviate the health condition. A regimen of treatment does not include the taking of over-the-counter medications such as aspirin, antihistamines, or salves; or bed-rest, drinking fluids, exercise, and other similar activities that can be initiated without a visit to a health care provider.

Evanston Campus Employees: Human Resources 720 University Place Evanston, IL 60208-1145 (847)491-7507 Phone (847)491-5136 Fax	NORTHWESTERN UNIVERSITY Leave of Absence Request Please print or type	Chicago Campus Employees: Human Resources, Rm. 150 710 North Lake Shore Drive Chicago, IL 60611-3008 (312)503-8481 Phone (312)503-1741 Fax
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EMPLOYEE INFORMATION

NAME Last _____ First _____ M.I. _____		SOCIAL SECURITY NO. _____	
JOB TITLE _____		DEPARTMENT: _____	
HOME ADDRESS Street _____ Apt. _____ City _____ State _____ Zip _____		CAMPUS: _____	
EMPLOYMENT STATUS <input type="checkbox"/> Biweekly <input type="checkbox"/> Monthly	DATE OF HIRE: _____	CAMPUS PHONE: _____	HOME PHONE: _____
For exempt employees, please specify the amount of accrued but <u>unused</u> time as of your final work day.	Vacation days: _____	Sick leave days: _____	Personal floating holidays: _____
			Supervisor verification: _____

REASON FOR THE LEAVE Please complete the following information indicating the purpose for the leave of absence:

<input type="checkbox"/> To attend school. Course of study: _____ <input type="checkbox"/> Personal. Attach a letter describing travel, research program, or relevance of leave to your University work. <input type="checkbox"/> Military Service <input type="checkbox"/> Other:(Explain) _____ _____	<input type="checkbox"/> Personal serious health condition* <input type="checkbox"/> To care for an immediate family member with a serious health condition* <input type="checkbox"/> For the birth of a child; Anticipated due date: _____ <input type="checkbox"/> For placement of a child for adoption or foster care; Anticipated date of placement, if known: _____ * Certification of Healthcare Provider form is required.
LAST WORK DAY: _____	RETURN TO WORK DAY: _____

ACKNOWLEDGEMENT

I understand that a Leave of Absence for illness or injury is a medical absence and must be supported with the completed Certification of Healthcare Provider. If this request is approved, I will return to University employment on the return to work day indicated above. My employment will be terminated at the end of the leave unless I request and receive prior to the return to work day a written approval for extension of the leave. In order to continue employee benefits during leave I must make arrangements with the Benefits Division for payment of any required premiums at the rates applicable to employees on Leaves of Absence. A Leave of Absence At-Large holds no guarantee of continued employment. I have received information regarding my entitlements under the Family & Medical Leave Act of 1993.

Prior to the start of a Leave of Absence, I will use all accrued unused vacation and personal floating holiday time. During an unpaid leave I do not accrue sick leave, vacation, or personal floating holidays and I am not eligible for any paid holidays. I understand that misrepresentation in requesting a Leave of Absence may result in termination of employment.

EMPLOYEE SIGNATURE _____	DATE _____
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APPROVALS

Requests for leave of absence must be reviewed by the Department of Human Resources for authorization or denial.

DEPARTMENT SUPERVISOR: The request for the leave of absence is: <input type="checkbox"/> Recommended <input type="checkbox"/> Not recommended; Reason: _____ _____ <input type="checkbox"/> The Department will reinstate this employee in the same position upon return from the leave of absence, unless the employee is unable to perform the essential duties. <input type="checkbox"/> The Department is unable to hold the position for the employee's return from leave. A leave at large is recommended. Reason: _____	Name (please print) _____ Title _____ Signature _____ Date _____
HUMAN RESOURCES: The request for the leave of absence is: <input type="checkbox"/> Approved Leave of Absence <input type="checkbox"/> Approved Leave of Absence At Large <input type="checkbox"/> Not approved If approved, first date of unpaid leave: _____	Name (please print) _____ Title _____ Signature _____ Date _____