

BONITA UNIFIED SCHOOL DISTRICT
LEAVES OF ABSENCE REQUEST FORM (Including FMLA/CFRA Leaves)

This form should be used for all requests for leaves of absence from duty, paid or unpaid except for approved work related injuries/claims.

I. General Information:

Employee Name: _____ Job Title: _____

Home Phone: _____ Worksite: _____

Supervisor's Name/Phone: _____

II. Duration of Requested Leave:

Leave Starts On: _____ Expected Return Date: _____

Is this an extension of an existing leave? Yes _____ No _____

If yes, indicate your original leave dates From: _____ To: _____

III. Type of Leave: (Check All That Apply)

A Extended Leave for Illness or Injury of Employee
(FMLA/CFRA) Please provide supporting documentation

B Maternity/Child Birth Leave (PDL)
Please provide supporting documentation

C Parental Leave (FMLA/CFRA)
Please provide supporting documentation

D Personal Leave For Qualifying Event (FMLA/CFRA)
Please attach medical documentation

*Please see the back of this form for explanation of leaves and pay status.

IV. Authorization(s):

Employee Signature: _____ **Date:** _____

Human Resource Department: _____ **Date:** _____

(SECTIONS V & VI TO BE COMPLETED BY HUMAN RESOURCES)

V. Notice of FMLA/CFRA: Family Medical Leave Act (FMLA) & California Family Rights Act (CFRA) allows eligible employees 12 weeks or 480 hours of protected time off. Where applicable, the time period of your leave will automatically be covered under FMLA/CFRA, unless you advise your supervisor immediately that you disagree with the determination.

Parental Leave of Absence (FMLA/CFRA) Employees are entitled to 50% pay after using all accrued sick leave.

FMLA/CFRA Eligible: Yes _____ No _____ Sign/Date: _____

VI. Pay Status During the Leave:

Paid leave: ____ (accrued leave ____ days) Some paid leave and some unpaid leave: ____

Unpaid leave: ____ Catastrophic Leave Donation: ____

A. Extended Leave for Illness or Injury of Employee

Medical leave for an employee's own illness or injury, including physical or mental disability absences.

Classified - Compensation: Classified employees must exhaust all accrued sick leave, then if eligible may use catastrophic leave, and then are entitled to 50% of the employee's daily rate of pay for a maximum of 100 days, unpaid FMLA leave up to 12 weeks.

Certificated – Compensation: Certificated employees must exhaust all accrued leave, then if eligible may use catastrophic leave, and then are entitled to 50% of the employee's daily rate of pay not to exceed five months, unpaid FMLA leave up to 12 weeks.

Medical leaves require supporting documentation to include when the leave starts and the expected end date. Qualifying employees are entitled to FMLA/CFRA job protection for up to 12 weeks in a year during their medical leave.

B. Child Birth/Maternity Leave

Employee is unable to perform assigned duties due to temporary disability caused or contributed to by pregnancy, miscarriage, childbirth and recovery.

Classified - Compensation: Classified employees must exhaust all accrued sick leave and then are entitled to 50% of the employee's daily rate of pay.

Certificated – Compensation: Certificated employees must exhaust all accrued leave and then are entitled to 50% of the employee's daily rate of pay.

Child Birth/Maternity Leave requires a physician's verification. Employees are entitled to Pregnancy Disability Leave (PDL) job protection for up to 4 months.

C. Parental Leave

Following the birth or adoption of a baby, mothers and fathers who have worked for the District for one year qualify for up to 12 weeks of leave to bond with the baby. The 12 weeks must be taken within 1 year of the baby's birth or adoption.

Classified – Compensation: Classified employees must exhaust all accrued sick leave and then are entitled to 50% of the employee's daily rate of pay.

Certificated – Compensation: Certificated employees must exhaust all accrued leave and then are entitled to 50% of the employee's daily rate of pay.

D. Personal Leave for Qualifying Event

A qualifying employee may request leave for up to 12 weeks for the care of a spouse, child, parent, or domestic partner with a serious health condition or exigency relating to a family member's military service.

Classified/Certificated – This is unpaid leave under FMLA/CFRA, however an employee may use any accrued leave. The employee is entitled to a total of 12 weeks of job protection within one year.

PARENTAL LEAVE **(CERTIFICATED AND CLASSIFIED)**

