EMPLOYEE REQUEST FOR TIME OFF - DEPARTMENTAL (Submit to Supervisor)

is absent from duty for more than three (3) working days without an approved leave is considered have automatically resigned. Pay FROM THROUGH Total Hour Date Hour Hour Hour Hour Date Hour Hour Hour Date Hour Hour Hour Hour Date Hour Hour Date Date Date Date Date Date Date Date	Department:				Name:			
Purpose of Leave:	All foreseeable requests for time off must be submitted and approved in advance. An employee who is absent from duty for more than three (3) working days without an approved leave is considered to have automatically resigned.							
Purpose of Leave:	Pav	FROM		THROUGH			Total	
If requesting leave for family care reasons or one's own serious health condition, make sure you have obtained and read the notice on Employee Obligations under the Family and Medical Leave Act (FMLA). Pay Codes Pay Codes - Family Care/Medical Leave O11 Vacation F11 FMLA Vacation* 044 Comp. Time Off F44 FMLA Comp. Time Off* 033 Admin. Leave F33 FMLA Admin. Leave* O22 Sick Leave Time off recorded, as "Sick Leave" or "FMLA Sick Leave" can be used for the illness of the employee OR in a calendar year, you can use what you accrue in a six-month period of time to care for a family member. E LOA Without Pay FE FMLA Without Pay All compensatory time must be used before Leave of Absence without Pay can be granted. If leave is for employee illness, all Sick Leave must be exhausted before LOA without Pay is granted. 11J Jury Duty/Court Appearance (Attach a copy of Jury Duty Notice or Court Summons Bereavement Leave. (Indicate the relationship of the deceased to yourself and the State deceased resided in.) *ALL FMLA LEAVES REQUIRE MEDICAL CERTIFICATION, OR PROOF OF BIRTH, ADOPTION OR FOSTER PLACEMENT. FOR MEDICAL CERTIFICATION, USE FORMS PER1081A OR PER1081B. It is the employee's responsibility to request leave and provide the required documentation (includ a physician's statement - PER1081A or PER1081B - completed in full from each treating physicion a timely basis to the employee's department. The provision of similar documentation to another yeers.	_						Hours	
If requesting leave for family care reasons or one's own serious health condition, make sure you have obtained and read the notice on Employee Obligations under the Family and Medical Leave Act (FMLA). Pay Codes Pay Codes - Family Care/Medical Leave 011 Vacation F11 FMLA Vacation* 044 Comp. Time Off F44 FMLA Comp. Time Off* 033 Admin. Leave F33 FMLA Admin. Leave* 022 Sick Leave F32 FMLA Sick Leave* Time off recorded, as "Sick Leave" or "FMLA Sick Leave" can be used for the illness of the employee OR in a calendar year, you can use what you accrue in a six-month period of time to care for a family member. E LOA Without Pay FE FMLA Without Pay All compensatory time must be used before Leave of Absence without Pay can be granted. If leave is for employee illness, all Sick Leave must be exhausted before LOA without Pay is granted. 11.1 Jury Duty/Court Appearance (Attach a copy of Jury Duty Notice or Court Summons 11.B Bereavement Leave. (Indicate the relationship of the deceased to yourself and the State deceased resided in.) *ALL FMLA LEAVES REQUIRE MEDICAL CERTIFICATION, OR PROOF OF BIRTH, ADOPTION OR FOSTER PLACEMENT. FOR MEDICAL CERTIFICATION, USE FORMS PER1081A OR PER1081B. It is the employee's responsibility to request leave and provide the required documentation (includ a physician's statement - PER1081A or PER1081B - completed in full from each treating physicion a timely basis to the employee's department. The provision of similar documentation to anott party (e.g., LTD carrier, Worker's Compensation Administrator) does not relieve the employee his/her responsibility to provide this documentation to his/her department.		Buto	11041		ato	TIOU!	1100110	
If requesting leave for family care reasons or one's own serious health condition, make sure you have obtained and read the notice on Employee Obligations under the Family and Medical Leave Act (FMLA). Pay Codes Pay Codes - Family Care/Medical Leave 011 Vacation F11 FMLA Vacation* 044 Comp. Time Off F44 FMLA Comp. Time Off* 033 Admin. Leave F33 FMLA Admin. Leave* 022 Sick Leave F32 FMLA Sick Leave* Time off recorded, as "Sick Leave" or "FMLA Sick Leave" can be used for the illness of the employee OR in a calendar year, you can use what you accrue in a six-month period of time to care for a family member. E LOA Without Pay FE FMLA Without Pay All compensatory time must be used before Leave of Absence without Pay can be granted. If leave is for employee illness, all Sick Leave must be exhausted before LOA without Pay is granted. 11.1 Jury Duty/Court Appearance (Attach a copy of Jury Duty Notice or Court Summons 11.B Bereavement Leave. (Indicate the relationship of the deceased to yourself and the State deceased resided in.) *ALL FMLA LEAVES REQUIRE MEDICAL CERTIFICATION, OR PROOF OF BIRTH, ADOPTION OR FOSTER PLACEMENT. FOR MEDICAL CERTIFICATION, USE FORMS PER1081A OR PER1081B. It is the employee's responsibility to request leave and provide the required documentation (includ a physician's statement - PER1081A or PER1081B - completed in full from each treating physicion a timely basis to the employee's department. The provision of similar documentation to anott party (e.g., LTD carrier, Worker's Compensation Administrator) does not relieve the employee his/her responsibility to provide this documentation to his/her department.								
If requesting leave for family care reasons or one's own serious health condition, make sure you have obtained and read the notice on Employee Obligations under the Family and Medical Leave Act (FMLA). Pay Codes Pay Codes - Family Care/Medical Leave 011 Vacation F11 FMLA Vacation* 044 Comp. Time Off F44 FMLA Comp. Time Off* 033 Admin. Leave F33 FMLA Admin. Leave* 022 Sick Leave F32 FMLA Sick Leave* Time off recorded, as "Sick Leave" or "FMLA Sick Leave" can be used for the illness of the employee OR in a calendar year, you can use what you accrue in a six-month period of time to care for a family member. E LOA Without Pay FE FMLA Without Pay All compensatory time must be used before Leave of Absence without Pay can be granted. If leave is for employee illness, all Sick Leave must be exhausted before LOA without Pay is granted. 11.1 Jury Duty/Court Appearance (Attach a copy of Jury Duty Notice or Court Summons 11.B Bereavement Leave. (Indicate the relationship of the deceased to yourself and the State deceased resided in.) *ALL FMLA LEAVES REQUIRE MEDICAL CERTIFICATION, OR PROOF OF BIRTH, ADOPTION OR FOSTER PLACEMENT. FOR MEDICAL CERTIFICATION, USE FORMS PER1081A OR PER1081B. It is the employee's responsibility to request leave and provide the required documentation (includ a physician's statement - PER1081A or PER1081B - completed in full from each treating physicion a timely basis to the employee's department. The provision of similar documentation to anott party (e.g., LTD carrier, Worker's Compensation Administrator) does not relieve the employee his/her responsibility to provide this documentation to his/her department.								
If requesting leave for family care reasons or one's own serious health condition, make sure you have obtained and read the notice on Employee Obligations under the Family and Medical Leave Act (FMLA). Pay Codes Pay Codes - Family Care/Medical Leave 011 Vacation F11 FMLA Vacation* 044 Comp. Time Off F44 FMLA Comp. Time Off* 033 Admin. Leave F33 FMLA Admin. Leave* 022 Sick Leave F32 FMLA Sick Leave* Time off recorded, as "Sick Leave" or "FMLA Sick Leave" can be used for the illness of the employee OR in a calendar year, you can use what you accrue in a six-month period of time to care for a family member. E LOA Without Pay FE FMLA Without Pay All compensatory time must be used before Leave of Absence without Pay can be granted. If leave is for employee illness, all Sick Leave must be exhausted before LOA without Pay is granted. 11.1 Jury Duty/Court Appearance (Attach a copy of Jury Duty Notice or Court Summons 11.B Bereavement Leave. (Indicate the relationship of the deceased to yourself and the State deceased resided in.) *ALL FMLA LEAVES REQUIRE MEDICAL CERTIFICATION, OR PROOF OF BIRTH, ADOPTION OR FOSTER PLACEMENT. FOR MEDICAL CERTIFICATION, USE FORMS PER1081A OR PER1081B. It is the employee's responsibility to request leave and provide the required documentation (includ a physician's statement - PER1081A or PER1081B - completed in full from each treating physicion a timely basis to the employee's department. The provision of similar documentation to anott party (e.g., LTD carrier, Worker's Compensation Administrator) does not relieve the employee his/her responsibility to provide this documentation to his/her department.								
have obtained and read the notice on Employee Obligations under the Family and Medical Leave Act (FMLA). Pay Codes Pay Codes - Family Care/Medical Leave 11 Vacation F11 FMLA Vacation* 12 Comp. Time Off F44 FMLA Comp. Time Off* 13 Admin. Leave F33 FMLA Admin. Leave* 14 Sick Leave F22 FMLA Sick Leave* 15 Time off recorded, as "Sick Leave" or "FMLA Sick Leave" can be used for the illness of the employee OR in a calendar year, you can use what you accrue in a six-month period of time to care for a family member. 15 LOA Without Pay FE FMLA Without Pay FMLA Wit	PURPOSE OF LEAVE:							
O11 Vacation F11 FMLA Vacation*	have obtained and read the notice on Employee Obligations under the Family and Medical Leave							
O44 Comp. Time Off								
033 Admin. Leave F33 FMLA Admin. Leave*								
Sick Leave								
Time off recorded, as "Sick Leave" or "FMLA Sick Leave" can be used for the illness of the employee OR in a calendar year, you can use what you accrue in a six-month period of time to care for a family member. E LOA Without Pay FE FMLA Without Pay All compensatory time must be used before Leave of Absence without Pay can be granted. If leave is for employee illness, all Sick Leave must be exhausted before LOA without Pay is granted. 11J Jury Duty/Court Appearance (Attach a copy of Jury Duty Notice or Court Summons Bereavement Leave. (Indicate the relationship of the deceased to yourself and the State deceased resided in.) *ALL FMLA LEAVES REQUIRE MEDICAL CERTIFICATION, OR PROOF OF BIRTH, ADOPTION OR FOSTER PLACEMENT. FOR MEDICAL CERTIFICATION, USE FORMS PER1081A OR PER1081B. It is the employee's responsibility to request leave and provide the required documentation (includ a physician's statement - PER1081A or PER1081B - completed in full from each treating physician a timely basis to the employee's department. The provision of similar documentation to another party (e.g., LTD carrier, Worker's Compensation Administrator) does not relieve the employee his/her responsibility to provide this documentation to his/her department.								
employee OR in a calendar year, you can use what you accrue in a six-month period of time to care for a family member. E LOA Without Pay FE FMLA Without Pay All compensatory time must be used before Leave of Absence without Pay can be granted. If leave is for employee illness, all Sick Leave must be exhausted before LOA without Pay is granted. 11J Jury Duty/Court Appearance (Attach a copy of Jury Duty Notice or Court Summons Bereavement Leave. (Indicate the relationship of the deceased to yourself and the State deceased resided in.) *ALL FMLA LEAVES REQUIRE MEDICAL CERTIFICATION, OR PROOF OF BIRTH, ADOPTION OR FOSTER PLACEMENT. FOR MEDICAL CERTIFICATION, USE FORMS PER1081A OR PER1081B. It is the employee's responsibility to request leave and provide the required documentation (includ a physician's statement - PER1081A or PER1081B - completed in full from each treating physician a timely basis to the employee's department. The provision of similar documentation to anott party (e.g., LTD carrier, Worker's Compensation Administrator) does not relieve the employee his/her responsibility to provide this documentation to his/her department.	022			f the				
care for a family member. E LOA Without Pay All compensatory time must be used before Leave of Absence without Pay can be granted. If leave is for employee illness, all Sick Leave must be exhausted before LOA without Pay is granted. 11J Jury Duty/Court Appearance (Attach a copy of Jury Duty Notice or Court Summons Bereavement Leave. (Indicate the relationship of the deceased to yourself and the State deceased resided in.) *ALL FMLA LEAVES REQUIRE MEDICAL CERTIFICATION, OR PROOF OF BIRTH, ADOPTION OR FOSTER PLACEMENT. FOR MEDICAL CERTIFICATION, USE FORMS PER1081A OR PER1081B. It is the employee's responsibility to request leave and provide the required documentation (includ a physician's statement - PER1081A or PER1081B - completed in full from each treating physician a timely basis to the employee's department. The provision of similar documentation to anoth party (e.g., LTD carrier, Worker's Compensation Administrator) does not relieve the employee his/her responsibility to provide this documentation to his/her department.								
E LOA Without Pay All compensatory time must be used before Leave of Absence without Pay can be granted. If leave is for employee illness, all Sick Leave must be exhausted before LOA without Pay is granted. 11J Jury Duty/Court Appearance (Attach a copy of Jury Duty Notice or Court Summons Bereavement Leave. (Indicate the relationship of the deceased to yourself and the State deceased resided in.) *ALL FMLA LEAVES REQUIRE MEDICAL CERTIFICATION, OR PROOF OF BIRTH, ADOPTION OR FOSTER PLACEMENT. FOR MEDICAL CERTIFICATION, USE FORMS PER1081A OR PER1081B. It is the employee's responsibility to request leave and provide the required documentation (includ a physician's statement - PER1081A or PER1081B - completed in full from each treating physician a timely basis to the employee's department. The provision of similar documentation to another party (e.g., LTD carrier, Worker's Compensation Administrator) does not relieve the employee his/her responsibility to provide this documentation to his/her department.								
All compensatory time must be used before Leave of Absence without Pay can be granted. If leave is for employee illness, all Sick Leave must be exhausted before LOA without Pay is granted. 11J Jury Duty/Court Appearance (Attach a copy of Jury Duty Notice or Court Summons Bereavement Leave. (Indicate the relationship of the deceased to yourself and the State deceased resided in.) *ALL FMLA LEAVES REQUIRE MEDICAL CERTIFICATION, OR PROOF OF BIRTH, ADOPTION OR FOSTER PLACEMENT. FOR MEDICAL CERTIFICATION, USE FORMS PER1081A OR PER1081B. It is the employee's responsibility to request leave and provide the required documentation (includ a physician's statement - PER1081A or PER1081B - completed in full from each treating physician a timely basis to the employee's department. The provision of similar documentation to anothe party (e.g., LTD carrier, Worker's Compensation Administrator) does not relieve the employee his/her responsibility to provide this documentation to his/her department.	Е	LOA Without Pay FE FMLA Without Pav						
11J Jury Duty/Court Appearance (Attach a copy of Jury Duty Notice or Court Summons Bereavement Leave. (Indicate the relationship of the deceased to yourself and the State deceased resided in.) *ALL FMLA LEAVES REQUIRE MEDICAL CERTIFICATION, OR PROOF OF BIRTH, ADOPTION OR FOSTER PLACEMENT. FOR MEDICAL CERTIFICATION, USE FORMS PER1081A OR PER1081B. It is the employee's responsibility to request leave and provide the required documentation (includ a physician's statement - PER1081A or PER1081B - completed in full from each treating physician a timely basis to the employee's department. The provision of similar documentation to another party (e.g., LTD carrier, Worker's Compensation Administrator) does not relieve the employee his/her responsibility to provide this documentation to his/her department.		All compensatory time must be used before Leave of Absence without Pay can be granted. If leave is for employee illness, all Sick Leave must be exhausted before LOA without Pay is						
Bereavement Leave. (Indicate the relationship of the deceased to yourself and the State deceased resided in.) *ALL FMLA LEAVES REQUIRE MEDICAL CERTIFICATION, OR PROOF OF BIRTH, ADOPTION OR FOSTER PLACEMENT. FOR MEDICAL CERTIFICATION, USE FORMS PER1081A OR PER1081B. It is the employee's responsibility to request leave and provide the required documentation (includ a physician's statement - PER1081A or PER1081B - completed in full from each treating physician a timely basis to the employee's department. The provision of similar documentation to another party (e.g., LTD carrier, Worker's Compensation Administrator) does not relieve the employee his/her responsibility to provide this documentation to his/her department.	11J							
*ALL FMLA LEAVES REQUIRE MEDICAL CERTIFICATION, OR PROOF OF BIRTH, ADOPTION OR FOSTER PLACEMENT. FOR MEDICAL CERTIFICATION, USE FORMS PER1081A OR PER1081B. It is the employee's responsibility to request leave and provide the required documentation (includ a physician's statement - PER1081A or PER1081B - completed in full from each treating physician on a timely basis to the employee's department. The provision of similar documentation to another party (e.g., LTD carrier, Worker's Compensation Administrator) does not relieve the employee his/her responsibility to provide this documentation to his/her department.	11B	Bereavement Leave. (Indicate the relationship of the deceased to yourself and the State						
It is the employee's responsibility to request leave and provide the required documentation (includ a physician's statement - PER1081A or PER1081B - completed in full from each treating physician on a timely basis to the employee's department. The provision of similar documentation to another party (e.g., LTD carrier, Worker's Compensation Administrator) does not relieve the employee his/her responsibility to provide this documentation to his/her department.	deceased resided in.)							
a physician's statement - PER1081A or PER1081B - completed in full from each treating physician on a timely basis to the employee's department. The provision of similar documentation to another party (e.g., LTD carrier, Worker's Compensation Administrator) does <u>not</u> relieve the employee his/her responsibility to provide this documentation to his/her department.								
			Data				Date	