

# UNIVERSITY OF ARKANSAS AT MONTICELLO

## FAMILY MEDICAL LEAVE REQUEST FORM

(For Foreseeable FMLA Leave)

An employee must provide the employer at least thirty (30) days advance notice or as soon as practicable under the circumstances before FMLA leave is to begin if the need for the leave is foreseeable.

### **Personnel Information:**

Employee Name: \_\_\_\_\_ Employee ID # \_\_\_\_\_

Job Title: \_\_\_\_\_ Hire Date: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_ Department: \_\_\_\_\_

### **I am requesting family medical leave for the following qualifying reason(s):**

- ☐ For birth of a son or daughter, and to care for the newborn child.
- ☐ For placement with the employee of a son or daughter for adoption or foster care.
- ☐ To care for the employee's spouse, son, daughter, or parent with a serious health condition.
- ☐ Because of a serious health condition that makes the employee unable to perform the functions of the employee's job.
- ☐ Because of any qualifying exigency arising out of the fact that the employee's spouse, son, daughter, or parent is a covered military member on active duty (or has been notified of an impending call or order to active duty) in support of contingency operation.
- ☐ To care for a covered service member with a serious injury or illness if the employee is the spouse, son, daughter, or parent or next of kin of the service member.

Date of leave to begin: \_\_\_\_\_ Date of leave expected to end: \_\_\_\_\_

**I certify that the above information is true and correct to the best of my knowledge:**

Employee signature: \_\_\_\_\_ Date: \_\_\_\_\_

Eligible employees are entitled under the Family and Medical Leave Act (FMLA) to take up to 12 weeks of job-protected leave for yourself or family member for medical reasons. Eligible employees also have a right under the FMLA for up to 26 weeks of unpaid leave in a single 12-month period to care for a covered service member (current member of Armed Forces) with a serious injury or illness. Employees must use accrued paid leave such as sick, vacation, compensatory, or holiday leave, if available, when taking FMLA leave. Please submit this completed form directly to the University of Arkansas at Monticello Personnel Office.

An employee has an obligation to respond to employers' questions designed to determine whether an absence is potentially FMLA-qualifying. Where an employee does not comply with the employers' usual notice and procedural requirements, and no unusual circumstances justify the failure to comply, FMLA-protected leave may be delayed or denied.