

FMLA REVIEW QUESTIONS

1. **Eligible employees are allowed to take up to:**
 - ☐ a. 3 weeks paid leave
 - ☐ b. 6 weeks leave, half paid, half unpaid
 - ☐ c. 12 weeks paid or unpaid leave

2. **To qualify for FMLA leave, an employee must have worked for you for a total of:**
 - ☐ a. 12 months
 - ☐ b. 1,250 hours in the most recent 12 months
 - ☐ c. Both a and b

3. **All accrued leave time must be used for FMLA if an employee has leave time available:**
 - ☐ a. True
 - ☐ b. False

4. **You can deny FMLA leave to any employee who fails to give you 30 days notice.**
 - ☐ a. True
 - ☐ b. False

5. **Under FMLA; spouses, children, parents, and next of kin of military personnel with service-related injuries can take up to:**
 - ☐ a. 18 weeks leave
 - ☐ b. 24 weeks leave
 - ☐ c. 26 weeks leave

6. **Employees must take all their leave at once.**
 - ☐ a. True
 - ☐ b. False

7. **A service member of the regular armed forces is eligible to take leave because of a qualifying exigency leave:**
 - ☐ a. True
 - ☐ b. False

8. **Employees use FMLA leave for childbirth, but not for pregnancy related conditions.**
 - ☐ a. True
 - ☐ b. False

9. **Spouses both employed by the County are limited in the amount of family leave they may take for the birth and care of a newborn child, placement of a child for adoption or foster care or to care for a parent who has a serious health condition to a combined total of twelve (12) weeks.**
 - ☐ a. True
 - ☐ b. False

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10. Length of leave employees are entitled to use for military caregiver leave is:
- ☐ a. Twelve weeks of leave in a single twelve month period
 - ☐ b. There is not a specified length of leave as long as employee is eligible
 - ☐ c. Twenty-six weeks of leave in a single twelve month period
 - ☐ d. None of the above
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EMPLOYEE ACKNOWLEDGMENT

I affirm, I have read and understand the Family and Medical Leave Act Training Materials, Review Questions and Answers Sheet. I acknowledge that I will sign and return a copy of this acknowledgement to my supervisor.

Employee’s Signature

Department

Employee’s Printed Name

Supervisor’s Signature

Employees Title

Supervisor’s Printed Name

Today’s Date

Today’s Date