Family and Medical Leave Act (FMLA) Forms   University of California, Riverside
                                                       Academic Personnel Office

Click on the links to download a copy of each document in Microsoft Word and/or Adobe Acrobat format.

FML Checklist for Academic Employees (Jan 2002)
The purpose of this checklist to assist your department in evaluating leave requests and administering Family and Medical Leave. **http://academicpersonnel.ucr.edu/leaves/FMLcheck.doc**

Leave of Absence Request Form
The purpose of this form is to document the leave request. **http://hr.ucr.edu/Forms/FMLLeaveReq.pdf**

Academic Leave Form (UPAY 573)
This form serves several purposes: **http://academicpersonnel.ucr.edu/leaves/LeaveForm.doc**

1. It can be used by an employee to request leave for any purpose and to specify preferred pay options during the leave.

2. It is used by the department to document approval or denial of leave, and whether the leave is to be considered Family and Medical leave. It also provides a record of the pay status during the leave.

3. It provides essential documentation for continuation of employee benefits during a Family and Medical Leave.

Notice of Eligibility and Rights and Responsibilities – Family Medical Leave Act (Jan 2009)
This document is used to inform an employee of her or his rights under the Family and Medical Leave Act of 1993. When an employee provides notice of the need for leave for reasons covered by FMLA, the University must provide the employee with this notice or its equivalent pursuant to 29 C.F.R. § 825.300(b), (c). **http://atyourservice.ucop.edu/administrators/docs/09_fmla_elig_rights.pdf**

Certification of Health Care Provider for Employee's Serious Health Condition (Jan 2009)
Provides documentation of the employee's need for the leave. Employees must provide this to their health care provider, who should return it to the department. If leave is due to an employee's own serious health condition, a copy of the employee¹s job description should be attached.
http://atyourservice.ucop.edu/administrators/docs/09_fmla_cert_serious_health.pdf

Certification of Health Care Provider for Family Member's Serious Health Condition (Jan 2009)
Provides documentation to support employee's request for a leave due to a family member's serious health condition. Employees must provide this to their health care provider, who should return it to the department. This needs to be accompanied with a Declaration of Relationship (see below).
http://atyourservice.ucop.edu/administrators/docs/09_fmla_cert_serious_health_fam.pdf

Certification of Health Care Provider for Employee's Pregnancy Disability (Jan 2009)
Provides documentation to support employee's request for Pregnancy Disability Leave (PDL) due to pregnancy, childbirth or related medical condition. Employees must provide this to their health care provider, who should return it to the department.
http://atyourservice.ucop.edu/administrators/docs/09_fmla_cert_pregnancy.pdf

Certification of Qualifying Exigency for Military Leave (Jan 2009)
Provides documentation to support employee's request for a leave while the employee's child or parent is on active duty or call to active duty status. Employees must provide this to their health care provider, who should return it to the department.
http://atyourservice.ucop.edu/administrators/docs/09_fmla_cert_exig_leave.pdf

Certification for Serious Injury or Illness of Covered Servicemember (Jan 2009)
Provides documentation to support employee's request for a leave due to a serious injury or illness of a covered servicemember. Employees must provide this to their health care provider, who should return it

to the department. If leave is due to a family member's serious health condition, a Declaration of Relationship. **http://atyourservice.ucop.edu/administrators/docs/09_fmla_serious_injury.pdf**

Declaration of Relationship
Provides documentation to confirm family relationship when an employee's requests for a leave due to a family member's serious health condition. This accompanies a Certification of Health Care Provider for Family Member's Serious Health Condition. **http://hr.ucr.edu/Forms/FMLDeclarOfRelation.pdf**

Family and Medical Leave Return to Work Certification
Provides documentation that the employee is able to return to work. A job description should be attached to this when it is provided to the employee. Keep in mind that certification of an employee¹s ability to return to work may be required only where a department has a uniformly-applied policy or practice that requires all similarly-situated employees to provide such certification.
http://hr.ucr.edu/Forms/FMLRetToWorkCert.pdf

Family and Medical Leave Benefits Checklist
Provides information for employees about their benefits while they are on Family and Medical leave.
http://hr.ucr.edu/Forms/FMLBenefitsChecklist.pdf

Designation Notice (Jan 2009)
This document is used to inform an employee in writing whether leave requested under the FMLA has been determined to be covered under the FMLA.
http://atyourservice.ucop.edu/administrators/docs/09_fmla_desig_notice.pdf

For more information about Family and Medical Leave, visit "At Your Service" UC's benefit website at
http://atyourservice.ucop.edu/administrators/loa/fml.html