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**LEAVE OF ABSENCE REQUEST FORM**

**April 1, 2020 – December 31, 2020**

**EMPLOYEE NAME:**   **ID#**

**POSITION: Full-Time** [ ]  **Part-Time** [ ]

**LEAVE CODES**

**VAC** Vacation

**PER** Personal

**SIC** Sick (An illness or injury to self or immediate family member) Choose an item.

**EFMLA** FFCRA Expanded FMLA (See eligibility below)

 **EPSL-S** FFCRA Emergency Paid Sick Leave – Self (See eligibility below)

**EPSL-CO** FFCRA Emergency Paid Sick Leave – Caring for Other (See eligibility below)

**PAR** Parental Leave

**FUR** Furlough

**BRV** Bereavement (three days maximum) Choose an item.

 **JRY** Jury Duty (provide copy of summons or subpoena)

 **OTH** Other (provide explanation)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Leave Code** | **Start Date** | **End Date** | **# Hours Used** | **Check if Applies to Regular FMLA**  |
|       |       |       |       | [ ]  FMLA  |
|       |       |       |       | [ ]  FMLA  |
|       |       |       |       | [ ]  FMLA  |
|       |       |       |       | [ ]  FMLA  |

**Note:** Support Staff must record this information on their timecards.

Please forward a copy of the form to your supervisor, Payroll and Human Resources. You may submit electronically without your supervisor’s signature (while approved for remote work) to Payroll and Human Resources.

Please submit completed form by Monday at noon of the week following leave.

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***FMLA*** *must be verified through Human Resources. Please refer to the* [*FMLA Policy 5.44*](http://www.eastcentral.edu/board-policies/5-44-family-and-medical-leave-act/) *for qualifying FMLA leave.*

***Emergency Paid Sick Leave*** *for Self or Caring for Other as outlined in the FFCRA guidelines.*

***Expanded FMLA*** *as outlined in the FFCRA guidelines.*

***Sick Leave*** *used for reasons of personal illness, injury, or medical appointment of an employee and/or to care for an illness or injury or to attend to a medical appointment of an immediate family member as outlined in policy.*

*See* [*Paid Leave Policy 5.30*](http://www.eastcentral.edu/board-policies/5-30-paid-leave-benefits/) *&* [*Leave of Absence Policy 5.35*](http://www.eastcentral.edu/board-policies/5-35-leaves-of-absence/) *for complete details for College Paid Leave.*

**What is the Families First Coronavirus Response Act?**

The Families First Coronavirus Response Act (FFCRA or Act) requires certain employers to provide their employees with paid sick leave or expanded family and medical leave for specified reasons related to COVID-19. The Department of Labor’s (Department) Wage and Hour Division (WHD) administers and enforces the new law’s paid leave requirements. These provisions will apply from the effective date of April 1 through December 31, 2020.

**Emergency Paid Sick Leave for Self (EPSL-S) or Caring for Other (EPSL-CO)**

Paid sick leave for employees who are unable to work or telework due to one of the following circumstances. Covered employers must provide to **all employees** employed for at least 30 days.

**Emergency Paid Sick Leave for Self (EPSL-S)**

Full-time employees (up to 80 hours - max) and part-time employees (up to the average number of hours the employee normally works in a two-week period - max) are eligible for **paid sick leave** at the employee’s regular rate of pay where the employee is unable to work or telework due to a need for leave because you **(1)** are subject to a Federal, State, or local quarantine or isolation order related to COVID-19; **(2)** have been advised by a health care provider to self-quarantine due to concerns related to COVID-19; or **(3)** are experiencing symptoms of COVID-19 and are seeking medical diagnosis, you will receive for each applicable hour the greater of: your [regular rate of pay](https://www.dol.gov/agencies/whd/fact-sheets/56a-regular-rate), the federal minimum wage in effect under the FLSA, or the applicable State or local minimum wage. In these circumstances, you are entitled to a maximum of $511 per day, or $5,110 total over the entire paid sick leave period.

**Emergency Paid Sick Leave for Caring for Other (EPSL-CO)**

Full-time employees (up to 80 hours- max) and part-time employees (up to the average number of hours the employee normally works in a two-week period - max) are eligible for **paid sick leave** at two-thirds the employee’s regular rate of pay because the employee is unable to work or telework because you are: **(4)** caring for an individual who is subject to a Federal, State, or local quarantine or isolation order related to COVID-19 or an individual who has been advised by a health care provider to self-quarantine due to concerns related to COVID-19; **(5)** caring for your child whose school or place of care is closed, or child care provider is unavailable, due to COVID-19 related reasons; or **(6)** experiencing any other substantially-similar condition that may arise, as specified by the Secretary of Health and Human Services, you are entitled to compensation at 2/3 of the greater of the amounts above. Under these circumstances, you are subject to a maximum of $200 per day, or $2,000 over the entire two-week period.

**Expanded FMLA Leave (EFMLA)**

Up to an additional 10 weeks of **paid expanded family and medical leave** at two-thirds, the employee’s regular rate of pay where an employee is unable to work due to a bona fide need for leave to care for a child whose school or childcare provider is closed or unavailable for reasons related to COVID-19. Different from the regular provisions of the FMLA, any employee who has been working at least 30 calendar daysprior to the start date of the “qualifying need” is eligible for this emergency leave. Works in conjunction with regular FMLA.

* “Qualifying need” includes circumstances where an employee is unable to work (or telework) due to a need to care for a child under 18 years of age if the child’s school or place of care has been closed, or the child care provider is unavailable, due to a public health emergency.
* The first 10 days can be unpaid leave. Full-time and part-time employees may elect to use the FFCRA Emergency Paid Sick Leave for these 10 days.
* The remaining 10 weeks of FMLA leave is paid, at an amount not less than two-thirds of the employee’s regular rate, for the number of hours the employee would otherwise be scheduled to work. Full-time employees may use 1/3 of accrued paid leave in order to receive the full 40 hours of pay. The bill limits the amount of required pay for leave to no more than $200 per day and $10,000 in the aggregate.

**Family Medical Leave Act (FMLA)**

Employees are eligible for Family Medical Leave if they have worked at least 1,250 hours during the prior 12 months and employed with the College at least one year. Employees are entitled to take up to 12 weeks of leave without pay and/or utilize accrued leave during a 12-month period due to one or more of the following:

(a) For incapacity due to pregnancy, prenatal medical care or child birth;
(b) To care for the employee’s child after birth, or placement for adoption or foster care;
(c) To care for the employee’s spouse, son or daughter, or parent, who has a serious health condition;
(d) For a serious health condition that makes the employee unable to perform the employee’s job;
(e) A qualifying exigency arising out of the fact that the spouse, son, daughter, or parent of the employee is on active duty (or has been notified of an impending call or order to active duty) in the Armed Forces.