

REQUEST FOR LEAVE OF ABSENCE

AFSCME BARGAINING UNIT

Employee Name		Kent State ID		
	our middle initial if applicable ¶		Supervisor	
Is this request due to a work-related injury or illness?			□ Yes	
If yes, date of	incident	(You must file an "Employee Report of Inju	ury or Occupational Illness" form)	
I request <i>PAI</i>				
SICK LEAVE (AR				
Begin Date	Begin Time	A.M. □ P.M. End Date	End Time	
•	• •	on Explain		
_	•	nd related medical conditions		
	· ·	Return Date	hours on	
		Relationship	hours on	
Death i OTHER LEAVE	in immediate family	Relationship	hours on	date(s)
_	Begin Time	□ A.M. □ P.M. End Date	End Time	□ A.M. □ P.M.
□ VACAT	ION (ARTICLE 32)		hours on	date(s)
☐ COURT	LEAVE (ARTICLE 31) (inclu	hours on	date(s)	
☐ MILITARY LEAVE (ARTICLE 30) (requires documentation)			hours on	date(s)
☐ COMPENSATORY LEAVE (ARTICLE 20)			hours on	date(s)
□ DONOR LEAVE (UNIVERSITY POLICY) (requires documentation-liver, kidney or bone marrow).			hours on	date(s)
□ POLL W	ORK LEAVE (UNIVERSITY	POLICY) (submit request 14 days prior to election).	hours on	date(s)
*FMLA (UNIVERSITY POLICY) (requires documentation)			hours on	date(s)
☐ PAID PARENTAL LEAVE (requires documentation)			hours on	date(s)
☐ OTHER			hours on	date(s)
I DO NOT wish to	be called for overtime du	ring approved time off I DO wish to be ca	• , ,	time off
		☐ Chec	k Box Initials	ed)
·		□ A.M. □ P.M. End Date		•
*FMLA (UNIVERSITY POLICY) (requires documentation)				
□ DISABILITY LEAVE (ARTICLE 29) (requires documentation)				
□ LEAVES OF ABSENCE WITHOUT PAY (ARTICLE 27) (requires documentation)				
TYPE O	F LEAVE OF ABSENCE E	SEING REQUESTED		
		Employee Signature	Date	
☐ Approved/ Acknowledged	□ Disapproved	Supervisor/ Department Signature	e Date	
☐ Approved/ Acknowledged	☐ Disapproved	Department Head	Date	

*For FMLA Approval-Supervisor is acknowledging that the employee took the time or is scheduled to take the time away from work. Payroll will determine available leave. Submit FMLA leave forms directly to the Benefits department after supervisor acknowledgement.