



Request for Paid Leave— Medical Maternity Leave, Parental Leave, and Short-Term Disability

Employees are expected to give at least one week’s notice of the need for leave whenever possible. If emergency circumstances prevent the employee from giving one week’s notice, the employee is expected to give as much notice as possible. Family and medical leave (FMLA) will run concurrently with the leaves of absence listed on this form. After the employee, supervisor, and HR representative have signed the form below, completed forms should be sent to employeebenefits@byuh.edu.

Employee Information

Name of employee (last, first, middle)		Employee ID number
Department		Date
Estimated date leave is to begin	Estimated date of return to work	

Reason for Leave

<input type="checkbox"/> Medical maternity leave—6 calendar weeks	Delivery date
<input type="checkbox"/> Parental leave—6 calendar weeks or one semester	Birth date or adoption date
<input type="checkbox"/> Short-term disability	Qualifying date

Benefits Participation during Leave

All insurance premiums and other standard deductions will continue to be deducted from the employee’s pre-tax earnings.

Notes

Acknowledgment Signatures

I understand and agree to abide by the terms and conditions associated with my benefits I am requesting. I acknowledge that I have notified my supervisor and my Human Resource (HR) Department representative of my leave of absence for the reason noted above. I understand that no work is to be performed during this period. If changes occur that affect my leave, I understand that it is my responsibility to notify my supervisor and my HR representative of those changes.

Employee signature	Date
Supervisor signature	Date
HR representative signature	Date

Office Use Only

FMLA eligible <input type="checkbox"/> Yes <input type="checkbox"/> No	FMLA hours available	Leave hours entered in Workday <input type="checkbox"/> Yes <input type="checkbox"/> No	Initials
Eligible for other state or local programs <input type="checkbox"/> Yes <input type="checkbox"/> No		Location	