

Archdiocese of Los Angeles Leave of Absence Request

Please read the attached Archdiocesan Leave of Absence Policy. 1) Complete all sections of this form and give it to your supervisor, for signature, along with sufficient certification for the leave, (i.e., doctor's note). 2) Please bring the leave request and certification to the appropriate administrator (i.e., Pastor, Principal, or Human Resources for ACC/Cemeteries employees) for review and approval.

Employee Name: _____ Department: _____

Home Phone: _____ Cell Phone _____

Beginning date of absence: _____ Last date of absence: _____



REASON FOR LEAVE REQUEST

I am requesting:

___ Family and Medical Leave (FMLA) for:

___ The birth of a child, ___ placement of a child with me for adoption or foster care.

___ My own serious health condition.

___ To care for my ___ spouse, ___ child, ___ legally domiciled adult or ___ parent due to his/her serious health condition.

___ Because of a qualifying exigency since my ___ spouse, ___ son, ___ daughter, or ___ parent is on active duty status in support of a contingency operation as a member of the National Guard or Reserves.

___ Because I am the ___ spouse, ___ son or daughter, parent or ___ next of kin of a covered servicemember with a serious illness or injury who requires my care.

___ Personal Leave Reason: _____

___ Military Leave ___ Military Spouse Leave

___ Workers' Compensation Leave

ACKNOWLEDGEMENT

I have read and understand the attached Archdiocesan Leave of Absence policy. I understand that if leave eligibility requirements are met and the leave is approved, it is my responsibility to keep my supervisor and appropriate administrator (i.e., Pastor, Principal, or Human Resources for ACC/Cemeteries employees) informed regarding the status of my leave. I also understand it is my responsibility to pay required insurance premiums during my leave as stated in the attached leave policy.

Employee's Signature Date

Supervisor's/Department Head's Signature Date

Administrator's/Human Resources Representative's Signature Date