

REQUEST FOR EMPLOYEE LEAVE OF ABSENCE

Requests for a leave of absence must be accompanied by this form, along with any other required documents (ex: FMLA form) and signed by the employee's immediate supervisor (see below).

	Name(I	Print)		ID # 912		
	Work Location			Position		
	Leave o	f Absence Dates: Begin		End		
A.	Leave of Absence Request (Please check one):					
	1	hours during the 12-month time fra due to the birth/care of newborn ch member as defined in Cabell Coun condition hindering the employee f	been employed with Cabell County Schools for at least 12 months and worked at least 1,250 ame. Up to 12 weeks of paid (if employee has earned/accrued sick/personal days) or unpaid leavilld, adoption/care, employee providing care for spouse, child, parent (or other immediate family ty Policy 3431; 4431) with a serious health condition, or the employee's own serious health from performing the functions of their position. <i>Cabell County Policy 3430.01;4430.01</i> red: FMLA Form for Employee or Family Member			
	2	This leave provides up to 12 weeks leave, due to birth or adoption of a continuous continuous and the second continuous c	of unpaid leave in a child; care for emplo th care provider is r	red full-time for at least 12 consecutive weeks winy 12-month period, following the exhaustion of yee's child, spouse, parent or dependent who has equired. Cabell County Policy 3430.03;4430.03 e Form	all annual and personal	
	3 Extended Leave: Unpaid leave for up a Cabell County Policy 3430.04; 4430.04			o one (1) year for pregnancy, childbirth, or adoptive/infant bonding.		
	4			ice; Cabell County Policy 3437;4437 Military Leave Form <u>and</u> a copy of the Military Orders		
	5	Short -Term Leave: Up to a maximum of forty-nine (49) consecutive workdays. An employee granted an unpaid short-term leave of absence shall be re-employed in the same assignment held prior to the leave, provided the leave does not exceed 49 workdays. The request for a short-term leave of absence must be made at least ten (10) workdays prior to the effective dates of leave and returned to the appropriate personnel office. Qualifiers for short-term leaves of absence are listed below. Cabell County Policy 3430.06; 4430.06				
	6 Long-Term Leave: Minimum of fifty (50) workdays and up to the maximum number of workdays in the employee's employment term for one school year. Any employee granted a long-term leave of absence shall be re-employed in the same assignment held prior to the leave, provided the leave does not exceed one year. The request for a long-term leave of absence be made at least ten (10) workdays prior to the effective date of the leave and returned to the appropriate personnel office. Qualifiers for long-term leaves of absence are listed below. Cabell County Policy 3430.05; 4430.05					
	Oualifi	ers for Short/Long-Term Leave of A	bsence (Please ch	eck one if applying for Short/Long-Term Le	eave of Absence):	
Illness- (Short-Term or Long-Term; Written documentation					,	
		Non-School Related Activity -	(Short-Term only;	Must be of value to the employee; Written docum	nentation is required)	
		Improvement of Job-Related S	kills- (Long-Term o	nly; Copy of course of study/syllabus is required	; not eligible for insurance	
В. Т	Terms :	and Conditions				
a. Leaves of absence policies in their entirety can be found at https://www.cabellschools.com/						
	b.			s Policies and Procedures, in addition to federal a		
	c.	Coordinator to discuss insurance prem		e, employees are encouraged to contact the Cabes.	en County Schools Benefit	
	d.	d. Leaves of absence require the recommendation of the Superintendent and must be approved by the members of the Cabell Count Board of Education.				
	e.					
	f.	Upon return to work from an approved medical leave, a <i>return-to-work</i> release form will be required from the employee's health care provider.				
Emp	Employee Signature		Date	Immediate Supervisor's Signature	Date	
 Pers	Personnel Manager's Signature		Date	Superintendent's Signature	Date	