ESU 8 REQUEST FORM FOR FMLA LEAVE

Employee's name:_____ Date of request: _____

My date of hire is:_____

My department and job title are:_____

My work location is:_____

I have ❏ have not ❏ taken a leave of absence in the past twelve months.

I request a leave of absence for the following reason:

❏   To care for my child who was born on: _____

❏   Because I am adopting a child who will be placed with me on: _____

❏   Because a child is being placed with me for foster care or I will be acting "in loco parentis" beginning on:_____

❏   To care for my spouse, child, or parent who has a serious health condition that began on: _____

❏   Because of a serious health condition that began on: _____ and that renders me unable to perform the functions of my job.

❏   To deal with a "qualifying exigency" arising out of the active duty or impending call or order for active duty of my spouse, son, or daughter who is a member of the National Guard or Reserves.

❏   To care for a spouse, son, daughter, or next of kin who is a member of the Armed Forces undergoing medical treatment, recuperation, or therapy, is otherwise on outpatient status or is otherwise on the temporary retirement list for serious injury or illness.

I would like the leave to begin on: _____

I expect to return to work on: _____

My address and telephone number during the leave will be: _____

_____

_____

_____

_____

_____   _____
Date   (Employee's Signature)

RETURN FORM TO ESU 8 BUSINESS OFFICE AS SOON AS COMPLETED

The Genetic Information Nondiscrimination Act of 2008 (GINA) prohibits employers and other entities covered by GINA Title II from requesting or requiring genetic information of employees or their family members. In order to comply with this law, we are asking that you not provide any genetic information when responding to this request for medical information. 'Genetic information,' as defined by GINA, includes an individual's family medical history, the results of an individual's or family member's genetic tests, the fact that an individual or an individual's family member sought or received genetic services, and genetic information of a fetus carried by an individual or an individual's family member or an embryo lawfully held by an individual or family member receiving assistive reproductive services."