



**Leave Application – Non-Admin/Direct Care**

**EMPLOYEE INFORMATION**

Employee Name: \_\_\_\_\_ Today's Date \_\_\_\_\_  
 Assigned House: \_\_\_\_\_ Supervisor : \_\_\_\_\_  
 Assigned Schdule: \_\_\_\_\_ Total Hours Per Week: \_\_\_\_\_  
 Leave Request Fo: From \_\_\_\_\_ To \_\_\_\_\_ Return to Work on: \_\_\_\_\_ Date: \_\_\_\_\_

Reason for Absence: Sick  Doctor's Visit  Medical ER  Funeral  Military  IWIF  Jury Duty   
 FMLA  Weather  Car Problem  Other

Requests for LEAVE must be received by the HR Director no less than two weeks prior to the first day employee will be absent. Leave requests due to unavoidable circumstances or illness require verbal approval from Department Director per policy, followed by submission of documents justifying the absence on the first day after returning to work.

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**SUPERVISOR'S USE ONLY**

Do you recommend leave? Yes \_\_\_ No \_\_\_ If yes, can coverage be arranged: Yes \_\_\_ No \_\_\_  
 Is the employee trained to do coverage? Yes \_\_\_ No \_\_\_ If no, what arrangement is made to train \_\_\_\_\_  
 Name of employee who will do coverage \_\_\_\_\_ Signature of employee agreeing to provide coverage \_\_\_\_\_  
 Date \_\_\_\_\_ Supervisor Signature \_\_\_\_\_ Title \_\_\_\_\_

**PROGRAM DIRECTOR'S USE ONLY**

Do you recommend leave? Yes \_\_\_ No \_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

**HR USE ONLY**

Fiscal Year: July 1, 201\_\_ to June 30, 201\_\_

Date of Hire: \_\_\_\_\_ Benefits Eligibility Date: \_\_\_\_\_  
 Employee Status:  Full Time (40 hours or more / week)  Part Time (30-39 hours / week)  Part Time (<30 hours / week)

Sick Hours Eligible  Hours Accrued  Hours Used  Hours Eligible Available   
 ETO Hours Eligible  Hours Accrued  Hours Used  Hours Eligible Available

Forwarded to Executive Payroll Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**EXECUTIVE APPROVAL OF LEAVE**

APPROVED  WITH PAY  WITHOUT PAY  DENIED

Comments \_\_\_\_\_

Signature /Date: \_\_\_\_\_

Completed Leave application will be returned to HR Folder. Employee and Supervisor will both be notified of leave status.

\*ETO is the combined accrued time earned from vacation time and any potential sick time for benefit-eligible employees