



Employee Request for Family Medical Leave

Human Resources

To be completed by the employee and returned to:

The Office of Human Resources, Risk Management 3375 Camino del Rio South #385, San Diego, CA 92108, Phone 619.388.6953 Fax 619.388.6898

Employee Name: _____ Employee ID#: _____

Home Address: _____ City: _____ State: _____

Home / Cell Phone: _____ Office Phone: _____ Employee Email: _____

Department : _____ Campus : _____ Supervisor/Manager: _____

Family and Medical Leave may be used for the following circumstances. Please check appropriate box:

- Birth and Care of your child.**
- Adoption or Foster Care Placement of your child.***
 - o My child is either under age 18, or age 18 or older and “incapable of self-care.”
Age of child: _____
- Serious Health Condition**
 - o My own
 - o My spouse¹
 - o My parent*
 - o My child, who is either under age 18, or age 18 or older and “incapable of self-care because of mental or physical disability. Age of child: _____
- Military Caregiver Leave***
 - o I am the spouse of the Service Member
 - o I am the parent of a Service Member and stand in loco parentis of the Service Member
 - o I am the son or daughter of the Service Member
 - o I am the Next of Kin of the Service Member
- Military - Qualifying Exigency Leave**

*Definitions are located in the San Diego Community College District Benefits Enrollment Guide <http://hr.sdccd.edu/benefits/benefirms.cfm>

Dates Requested for Family Medical Leave or Military Caregiver/Qualifying Exigency Leave

Start Date: _____ End Date: _____

My FMLA dates are unscheduled I am requesting Intermittent Leave due to a Serious Medical Condition for self, spouse, parent or child

Additional Information:

- A leave request based on the birth of a child, an employee’s serious health condition, or the serious health condition of an employee’s spouse, child, or parent must be accompanied by a Certification of Health Care Provider Form. The District has the right to ask for second and third certifications if the District has reason to doubt the validity of the certification.
- To take Military Caregiver leave it must be accompanied by the appropriate Certification Form that can be obtained in the Human Resources, Risk Management.
- SDCCD considers an employee’s eligibility for FMLA leave under a “rolling” 12-month period measured backward from the date an employee uses any FMLA leave.
- FMLA is unpaid leave and, therefore, employees are required to use their available paid leave in conjunction with FMLA. If the employee exhausts their paid leave, then the employee will be on FMLA leave without pay status. This may affect other benefits. For more information, please contact Human Resources, Risk Management at 619.388.6953.

Employee Signature: _____ Date: _____

Approved By District: _____ **Input Date:** _____

¹My Spouse is is not currently employed by San Diego Community College District. FMLA provides that spouses who both work for the District are eligible for a combined allotment of leave for the categories (*) marked.