

Application for Maternity Leave

Maternity leave is to be treated as any other leave for sickness or disability. However, you may elect to take leave of absence without pay without exhausting accumulated annual and sick leave. If you plan to be out more than five (5) consecutive days for maternity leave, you must furnish the Human Resources Office with a Certification from your Attending Physician. This maternity leave should not extend past three months following delivery and you should give your supervisor at least a two week notice of your planned return to work date. In the event you are eligible for leave under the Family Medical Leave Act, this maternity leave will be counted as F.M.L.A. leave.

Expected delivery date:

Last day on job:

Expected date of return:

*I wish to take the following type(s) of leave: Annual Sick Leave without Pay

Employee's Name Employee's ID Number

Employee's Signature Date

Human Resources Signature Title Date

For Financial Services Use Only

Leave will be applied as follows

	From	Through
Annual
Sick
Leave without pay

Payroll Department Signature Title Date

*Sick and/or annual leave may be used intermittently with LWOP each pay period to minimally create a check large enough to cover your insurance premium payments. Time not covered under sick and/or annual leave each pay period will be reported as LWOP.

In the event sick and/or annual leave is not available or not utilized, you will be put on LWOP. If on LWOP for an entire pay period, insurance premium payments must be paid as follows to maintain insurance benefits:

**For those who qualify for FMLA, you must pay the employee share of premiums.
 For those who DO NOT qualify for FMLA, you must pay 100% (employee premium AND employer contribution).**

If you elect to utilize sick and/or annual leave intermittently, you must contact the payroll department at: 501-671-2039.

Completed form must be faxed to the Human Resources Department at: 501-671-2251.