



University of Massachusetts

Employee's Family/Medical Leave Request Checklist

Required:

- Submit a written, signed, and dated request for leave to your supervisor (faculty should submit to their department chair or dean) indicating:
 - 1) the medical condition that prohibits you from performing your job (or if you are requesting leave to care for another person suffering from a serious health condition),
 - 2) the dates you anticipate being absent from work and the date you intend to return to work,
 - 3) how you are requesting that time and attendance be submitted if your leave is approved (e.g., sick leave, unpaid leave, etc.), and
 - 4) if requesting an intermittent leave, the work schedule you propose.
- The letter must be accompanied by a Certification of Health Care Provider (HCP) form completed by your HCP – or - the HCP who is treating the individual you will be caring for while on leave (parent, child, sibling, etc. The list of covered individuals differs from bargaining unit to bargaining unit).

Voluntary:

- a completed Sick Leave Bank application to Human Resources (or AFSCME Extension of Sick Leave application) if you will not have enough accrued time to secure income during your leave. Repeat as necessary.

Required:

- If requesting an extension of your leave – follow steps above, submitting the required documents to your supervisor for his/her receipt at two weeks prior to the expiration of your currently approved leave. Repeat as necessary.
- During your leave you must remain in contact with your supervisor about your medical progress and/or changes in your leave situation and intention to return to your University position.
- Prior* to returning to your job you must provide your supervisor a written medical document releasing you to return to work and perform the essential functions of your job *and* any accommodations you are requesting in order to do so, if any.

Note:

- if you are on approved, *unpaid* leave for two or more full payperiods and you carry health insurance through your University position you must complete a Request for Continuation of Part-Cost health insurance premium form with Human Resources (545-6113). If you do not the Massachusetts Group Insurance Commission will invoice you for 100% of the health insurance premium in order to maintain coverage.
- If you are on parental leave and wish to add your child(ren) to your insurance coverages you must complete the necessary paperwork with Human Resources (HR Service Center, room 325 Whitmore Administration Building, open Monday – Friday, 8:30am – 5:00pm) within thirty (30) days of the child(ren)'s date of birth or adoption.