

APPROVAL REQUIREMENTS

The administrative head of a department (including academic chairpersons) will approve on a day-to-day basis, and finally at the end of each month, leave taken by a member of his/her staff. The academic and nonacademic department heads will then forward the leave request forms through channels for signatures and final approval at the end of each month. The Vice President and any other staff members who report directly to the President shall submit forms to the President for disposition and approval.

*DOCUMENTATION REQUIREMENT WHICH MUST ACCOMPANY THE LEAVE REQUEST

1. SICK LEAVE – When the period of absence is in excess of three continuous working days, the employee will provide a physician’s statement indicating the cause or nature of the illness, the duration of the illness, and the estimated date of recover, or some other written statement of the facts concerning the illness which is acceptable to the President or his designee. Should the estimated date of recovery change, the employee will submit a supplemental written statement from the attending physician showing the new estimated date of recovery. Physician’s statements shall be appended to the leave request. For periods of less than 3 continuous working days, a simple statement in the space provided on the leave form is sufficient.

IF THE LEAVE IS REQUESTED FOR DEPENDENT ILLNESS, INDICATE:

| NAME | RELATIONSHIP | DATE(S) |
|--|--------------|---------|
| 2. <u>SICK LEAVE POOL</u> – Hours which have been approved by the Pool Administrator, in accordance with TSU Sick Leave Pool Policy. | | |
| 3. <u>COMPENSATORY TIME</u> – See “Overtime” provisions in TSU Staff Handbook. | | |
| 4. <u>JURY DUTY</u> –To receive pay for the time served on jury duty, a statement from the Clerk of the Court specifying the date(s) and time(s) served must accompany the request for leave form. | | |
| 5. <u>FAMILY AND MEDICAL LEAVE ACT</u> – As provided by Federal Law. If the leave requested (whether sick leave, annual leave, parental leave, or other paid or unpaid leave) is due to one of the following reasons, this leave will count toward the entitlement for Family and Medical Leave during each fiscal year, beginning September 1, 1993 (contact Human Resources for details). <ul style="list-style-type: none"> • Birth of a child • Placement in home for adoption or state-certified foster care • Employee’s serious health condition • To care for employee’s spouse, child, or parent with serous health condition | | |
| 6. <u>EMERGENCY</u> – To receive time off on an emergency basis or for situations not falling within usual paid leave procedures. An Emergency Leave Form must be completed and approved at the time of the leave. Example: Bereavement, travel conditions, national emergency. | | |
| 7. <u>OTHER</u> – MILITARY LEAVE, VOLUNTEER FIRE FIGHTER TRAINING, and/or OTHER LEAVE – see TSU Staff Handbook | | |
| 8. <u>LEAVE WITHOUT PAY</u> – If the employee is requesting leave without pay for reasons of illness, the same documentation requirements must be satisfied as indicated in Items 1 and 5 above. For other leave without pay requests, see applicable System Policy for requirements. NOTE: At the supervisor’s first knowledge that an employee will be in a leave without pay status for any reason, Human Resources or Payroll should be notified <u>immediately</u> . | | |

State law requires that you be informed of the following: (1) you are entitled to request to be informed about the information about yourself collected by use of this form (with a few exceptions as provided by law); (2) you are entitled to receive and review that information; and (3) you are entitled to have the information corrected at no charge to you.