

# Parental Leave Request Form, Policy 3516



The department will provide paid parental leave to all full-time and permanent part-time salaried employees upon the birth or adoption of a child for purposes of nurturing and bonding. This request form must be completed and signed by the employee and by the supervisor at least 30 days before the leave will occur. If advance notice is not possible due to unforeseeable or emergency situations, the department requires this form to be completed and submitted to your supervisor as soon as practical.

## **DEFINITIONS**

**Parent:** For purposes of this policy only, the parent is the lawful mother or father of a child either through birth or adoption.

**Parental Leave:** Department provided paid leave taken within 12 weeks following the birth or adoption of a child.

**Primary Caregiver:** An employee who provides parental care at least 50 percent of the time.

**Secondary Caregiver:** An employee who provides parental care less than 50 percent of the time.

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Employee Requesting Leave: \_\_\_\_\_

Anticipated Date of Birth or Adoption Placement: \_\_\_\_\_

Anticipated Dates to Take Parental Leave (leave can be taken in weekly increments, but must be taken within the 12 weeks following the birth or adoption of the child):

\_\_\_\_\_

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Please Check What Applies to You:

Primary Caregiver (6 weeks- LWPP)

Secondary Caregiver (3 weeks- LWPS)

**\*\*Be sure to contact Employee Benefits to enroll your child for health insurance within 31 days of birth/adoption, if coverage is desired.**

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

Supervisor's Signature \_\_\_\_\_ Date: \_\_\_\_\_

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*Employees and Supervisors are encouraged to keep a copy for their records, send completed Parental Leave Request Form to HR.*

Human Resources Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Notes/Additional Information: \_\_\_\_\_

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