

# Leave Administration Form | Leave Request Form



Department of Human Resources Leaves Administration Team

## Instructions

Employees should submit this completed request form to their agency human resource professional at least 30 calendar days before leave begins (if the leave is foreseeable) or as soon as possible (if the leave is unforeseeable). **A medical certification form is required for each requested leave of absence and serious health condition upon request by your agency.**

Employee Name \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_  
 Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Employee ID# \_\_\_\_\_ Supervisor Name \_\_\_\_\_ Work location \_\_\_\_\_  
 Name of spouse/domestic partner that works for King County (if applicable) \_\_\_\_\_

## Indicate Covered Family Member and Expected Leave Schedule

Self  Other Name and relationship \_\_\_\_\_ Date of Event: \_\_\_\_\_  
 Leave Reason (do not provide medical details) \_\_\_\_\_  
 Leave Start Date \_\_\_\_\_ Anticipated return to work date \_\_\_\_\_  
 Briefly describe how leave will be taken \_\_\_\_\_

## Indicate Order of Paid Accruals When Eligible for FMLA/KCFML/PPL (ex. 1, 2, 3, etc.)

(If applying for weekly PFML payments from ESD then not required to complete)

Reason for Leave	Sick	Vacation	Unpaid	Other	Paid Parental Lv.
Employee's Health Condition	Must use first	___	___	___ (____)	NA
Bonding (newborn, adoption, foster-to-adopt) Leave	___	___	___	___ (____)	___
Family Member Condition	___	___	___	___ (____)	NA

**KCFML Only:** I opt to reserve \_\_\_\_\_ hours (1-80) of my sick leave for later use (family member leave only)

**PFML:** Do you intend to apply for weekly Paid Family and Medical Leave payments through the Employment Security Department (ESD); PFML payments are not considered pay by King County.  YES  NO

## Employee acknowledgement of request – read carefully

The information I have provided is true, correct and complete. I understand that if I have falsified any information related to my Protected Family and Medical Leave Request, it may lead to disciplinary action up to and including discharge from employment. I understand that I am required to follow the usual and customary procedure for calling in. I will notify my supervisor and/or department human resources contact or designee if and when there are changes to the circumstances of my leave and provide updated medical certification as required. I understand that my supervisor or department human resources contact or designee may contact me during my leave period to verify my status and obtain updates as to my estimated date of return to work. I understand that for me to return to work from my own serious health condition, my health care provider may need to provide a release for return to full-time, part-time or transitional duty and that any release other than a full release must be reviewed and approved by my supervisor and/or department human resources contact or designee before I report to work. I understand that if I do not return to work for at least six months of continuous service after my paid parental leave, I will be required to reimburse King County for the paid parental leave funds received.

Employee signature \_\_\_\_\_ Date \_\_\_\_\_

Medical Certification form:  Attached  Not attached, but will be provided within fifteen calendar days on \_\_\_\_\_  Documentation attached for baby/child bonding

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## Notice of rights and obligations – Read carefully and keep for your records

King County complies with federal and state leave provisions as well as any changes to these laws as may occur through administrative interpretation, legislative enactment and controlling court decisions. Unless otherwise indicated, the information provided below is subject to such changes in the law and will be interpreted consistent with any such changes.

### Designation

Once protected leave is designated, it may count against your available leave entitlements. You are required to present a completed a medical certification and other appropriate documentation to substantiate your leave request. Failure to provide certification may result in denial of your protected leave entitlements and loss of benefits.

### Workers' compensation

Leave as a result of a work-place injury/workers' compensation may also qualify for protected leave which will run concurrently as long as you remain eligible for and have remaining entitlement balances. Payments received for a workers compensation claims are not considered pay by King County.

### Job protection and benefit continuation

- Under federal and state leave laws, you may be restored to your original or equivalent position with equivalent pay, benefits, seniority and other employment terms upon return from protected leave. You do not lose any employment benefits that accrued before the start of your leave, and no adverse personnel actions may be taken against you for taking protected leave.
- These protections do not apply if your job is eliminated due to a *bona fide* workforce reduction or if you do not return to work by the expiration date of your leave. Failure to return by the expiration date may be cause for removal and may result in termination of your employment.
- PCPRC leave does not provide continuation of county-paid health and insurance benefits unless the employee elects to use paid leave accruals or elects to begin concurrent use of FMLA/KCFML entitlements. Employees in this situation would be required to self-pay for continuation of health benefits via COBRA.
- PFML leave does not provide continuation of county-paid health and insurance benefits. Employees may qualify for these protections through use of protected leave, or use of King County paid accruals.
- PFML does not provide job protection unless eligible and running other types of protected leave or meet criteria under PFML.
- If you enter an unpaid status during use of FMLA, KCFML, WFCA, PPL, ACA or PCPRC you will be responsible for paying all basic and supplemental non-health (life, AD&D, LTD, STD) insurance premiums. Contact Benefits, Payroll and Retirement Operations at 206-684-1556.

### Returning from leave

Upon returning from your leave, you may be required to provide a written medical release if the leave was taken due to your own serious health condition. If you do not return to work following your leave, you may be liable for the employer's share of health care insurance premiums [29 CFR 825.301 (B)(1)].

### Advance notice and medical certification – Employees

- **Same Day/5 Days:** Employees should generally submit medical certification for FMLA/KCFML at the time of the request.
- **30 Days:** Foreseeable conditions or as soon as possible if unforeseeable (only FMLA, KCFML, PCPRC, PFML).
- **15 Days:** Deadline to submit medical certification to employer.
- **Chronic Conditions:** Visit doctor at least twice a year. Employer may request medical certifications every 6 months.
- You must provide 'documentation' (i.e., birth certificate, handwritten note from employee, etc.) to certify a leave of absence for the purpose of bonding with a newborn, adopted child or foster child.
- **Paid Parental Leave:** Request for intermittent PPL requires supervisor prior approval.

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## Advance notice and medical certification – Employer

- **5 Days:** Agencies have five days to inform employees of FMLA eligibility and PFML rights. Notice can be by email or using the standard Leave Response Form (eligibility for other leave laws also listed).
- **7 Days:** Incomplete or insufficient medical certifications (i.e., vague, ambiguous) must be returned to the employee with written instructions explaining necessary information for a complete certification. The employee has 7 days to meet with healthcare provider to correct areas and submit updated certification.
- **30 Days:** Agencies may not request re-certifications more often than every 30 days (some exclusions).
- King County (agency human resource professional or disability services) may contact the health care provider to clarify or authenticate medical certifications. The employee's direct supervisor may never communicate with the employee's health care provider.

## Use of paid and donated leave

- You must use all your sick leave for your own serious health condition unless the condition is due to an on-the-job injury or you are receiving PFML payments. After you exhaust your sick leave, you may use vacation and other paid leave. For use of other leave accruals, contact your department contact for information about its use.
- You must use all your own sick leave before using donated sick leave (except when using WFCA, PPL and PFML). You must use all your own vacation leave before using donated vacation leave.
- Paid Parental Leave will be calculated based on the employee's existing paid leave accruals (sick, vacation, and Executive leave) at the time of the qualifying event (the birth, adoption, or foster-to-adopt placement).
- Payments received through PFML are not considered pay by King County. Employees are not required to use their accrued sick leave before using PFML.

## Washington State Paid Family and Medical Leave (PFML)

- Employees may not supplement their PFML with their own paid accruals in order to achieve 100% of their regular pay. Employees applying for PFML will need to either use their own paid accruals OR receive PFML for their eligible leave.

## For additional information

- Contact agency human resource personnel to initiate leave or for leave related questions.
- Federal Family and Medical Leave Act (FMLA) law: <http://www.dol.gov/whd/fmla/index.htm>
- Washington Paid Family and Medical Leave: <https://paidleave.wa.gov/>
- Washington Family Care Act (WFCA) law: <http://apps.leg.wa.gov/WAC/default.aspx?cite=296-130>
- Pregnancy Discrimination (PCPRC) law: <http://apps.leg.wa.gov/WAC/default.aspx?cite=162-30-020>
- King County Paid Parental Leave: <http://www.kingcounty.gov/audience/employees/pay-benefits/paid-parental-leave.aspx>
- Washington State Department of Labor and Industries: 1-800-547-8367 or <http://www.ini.wa.gov>
- Contact Benefits, Payroll and Retirement Operations: 206-684-1556 or [kc.benefits@kingcounty.gov](mailto:kc.benefits@kingcounty.gov)



## Employer requirement to provide notice to employees

Employers with employees working in Washington state must provide the following notice to employees who may be eligible for Paid Family and Medical Leave the later of:

- Five business days after an employee's seventh consecutive day of absence due to family or medical leave, or
- Five business days after an employer becomes aware that the employee's absence is due to family or medical leave.

## Paid Family and Medical Leave

### Statement of Employee Rights

#### You may qualify for Paid Family and Medical Leave

As of Jan. 1, 2020, Washington employees who have worked 820 hours or more in the qualifying period and experience(d) a qualifying event have access to Paid Family and Medical Leave.

Employees who have missed work due to family or medical reasons may be eligible for paid family or medical leave for the following qualifications:

- Care for and bond with a child younger than 18 following birth or placement
- Care for yourself or a family member experiencing a serious health condition
- Certain military-connected events.

Paid Family and Medical Leave requires that you give your employer(s) written notice at least 30 days in advance of when you plan to take leave. However, if the reason you need leave was not foreseeable, you may notify your employer(s) as soon as possible.

The Paid Family and Medical Leave Benefit Guide provides information on how to apply for benefits and submit weekly claims. It also explains your rights and responsibilities under the law. Download the guide at [www.paidleave.wa.gov/benefit-guide](http://www.paidleave.wa.gov/benefit-guide).

For more information about how to apply, contact us at 833-717-2273 or visit [www.paidleave.wa.gov](http://www.paidleave.wa.gov).

#### Important information for when you apply

Employee name: \_\_\_\_\_ Date: \_\_\_\_\_

Employer UBI #: **578-055-920** \_\_\_\_\_ This employer offers supplemental benefits: Y \_\_\_\_\_ N **X** \_\_\_\_\_

Note: Except during the waiting week, employees cannot use employer provided paid time off at the same time as Paid Family and Medical Leave, unless the employer chooses to offer a "supplemental benefit." Supplemental benefits can be used along with Paid Family and Medical Leave to provide additional pay while an employee receives partial wage replacement through Paid Leave benefits. Employees may accept or reject supplemental benefit payments.

Employer signature: \_\_\_\_\_ Employer phone number: \_\_\_\_\_