

REQUEST FOR A LEAVE OF ABSENCE

- AUTHORITY:** Memorandum of Understanding
Family Medical Leave Act
California Family Rights Act
- RESCINDS:** Procedure Manual Item 1-3-001, dated **07/08/2011**
- FORMS:** **County of Orange Leave of Absence Form**
- PURPOSE:** To provide guidelines for processing a request for a leave of absence.

I. GENERAL INFORMATION

- A. It is the employee's responsibility to notify **the Human Resource Services' (HRS) Return to Work (RTW) staff** of the need for a leave of absence, an extension of an approved leave of absence, any change in their anticipated return to work date, and to provide appropriate documentation to support these requests as soon as possible.
- B. Requests for a leave of absence must be submitted **thirty (30) days** in advance or as soon as possible.
- C. Requests for an extension of the leave of absence must be submitted **fourteen (14) days** in advance or as soon as possible.
- D. Employees who are absent for more than **fourteen (14) calendar days** due to a personal illness or injury must be evaluated by **their medical provider and medical documentation must be provided to the HRS RTW staff** in order to obtain clearance to return to work.
- E. Employees are required to post any available balances during a leave of absence.
- F. Merit, probation, and PIP **due** dates will be **deferred** for the duration of an unpaid leave of absence, **catastrophic leave of absence, and workers compensation leave of absence.**
- G. Employees will not accrue service hours during an unpaid leave of absence.
- H. Types of Leaves
 - 1. Non – Discretionary
 - a. Medical Leave
 - (1) A regular, limited term, or probationary employee shall be granted, upon request, a leave of absence without pay for a non-occupational disability provided the employee supplies the appropriate required documentation.

- (2) Based on qualification, Family Medical Leave **Act (FMLA) and/or California Family Rights Act (CFRA) leave** shall be granted up to **twelve (12) weeks** per calendar year for any of the following reasons:
 - (a) The employee requires leave to care for their own serious health condition. **CFRA does not include pregnancy disability.**
 - (b) The birth of a child or placement of a child for adoption or foster care.
 - (c) The employee is needed to attend to the serious health condition of their child, **grandchild, grandparent, sibling, domestic partner,** spouse, parent, or individual standing in loco parentis.
- (3) In addition, the employee must meet the following criteria to qualify for **FMLA and/or CFRA:**
 - (a) Have been employed by the County of Orange for at least **twelve (12) months.**
 - (b) Have worked a minimum of 1,250 hours in the **twelve (12) months prior to the date of the leave request.**

- b. Military Leave – See PMI 1-3-004 (Military Leave of Absence)
- c. Parenthood Leave

A regular, limited term, or probationary employee shall be granted, upon request, a Parenthood Leave Without Pay for up to six (6) months in connection with the birth or placement for legal adoption of a child provided the employee supplies the required documentation.

- d. Pregnancy Disability Leave
 - (1) California state law provides for a non-discretionary leave of absence for up to four (4) months, as needed, for periods of time when an eligible employee is disabled by pregnancy.
 - (2) The leave may be taken intermittently or on a reduced work schedule when medically advisable, as determined by the employee's health care provider.

2. Discretionary

- a. Personal leaves are taken for purposes extending beyond those covered under non-discretionary leaves.

- b. Discretionary leaves are granted at the discretion of Executive Management and evaluated based on current business needs.

II. PROCEDURE

- A. An employee may request a leave of absence by completing the County of Orange Leave of Absence Form and submitting it to **HRS RTW staff** with the appropriate required documentation.

The approximate beginning date, date of return, and type of leave must be stated on the **Leave of Absence** form.

- B. **If the employee is requesting a discretionary leave of absence, the** immediate supervisor will forward all documents via the chain of command to the **HRS RTW staff**.
- C. **The HRS RTW staff** will prepare all **required** forms, **and, if necessary**, obtain the appropriate Chief Deputy Probation Officer's approval (**if leave request is discretionary**), and forward to the **HRS Records Specialist** for processing.
- D. If the **discretionary** leave request is approved **and/or non-discretionary leave request is granted, the HRS RTW staff** will process the leave and **inform** the direct supervisor **of the timeframe of the leave of absence and instructions regarding how to code the employee's timesheet during the absence**.
- E. If the **discretionary** leave request is denied, the employee will be notified in writing. The employee has the right to file a written appeal with the **Chief Human Resources Officer** within fifteen (15) calendar days from the date of written notification. The decision of the **Chief Human Resources Officer** shall be final.

REFERENCES:

Procedures:	1-3-004	Military Leave of Absence
	1-3-302	Return to Work from Illness or Injury
Policy:	C-3	Leaves: Personal, Medical, Family, Military, Workers' Compensation, Witness, Bereavement, OCEA Business

D. Martinez

APPROVED BY: