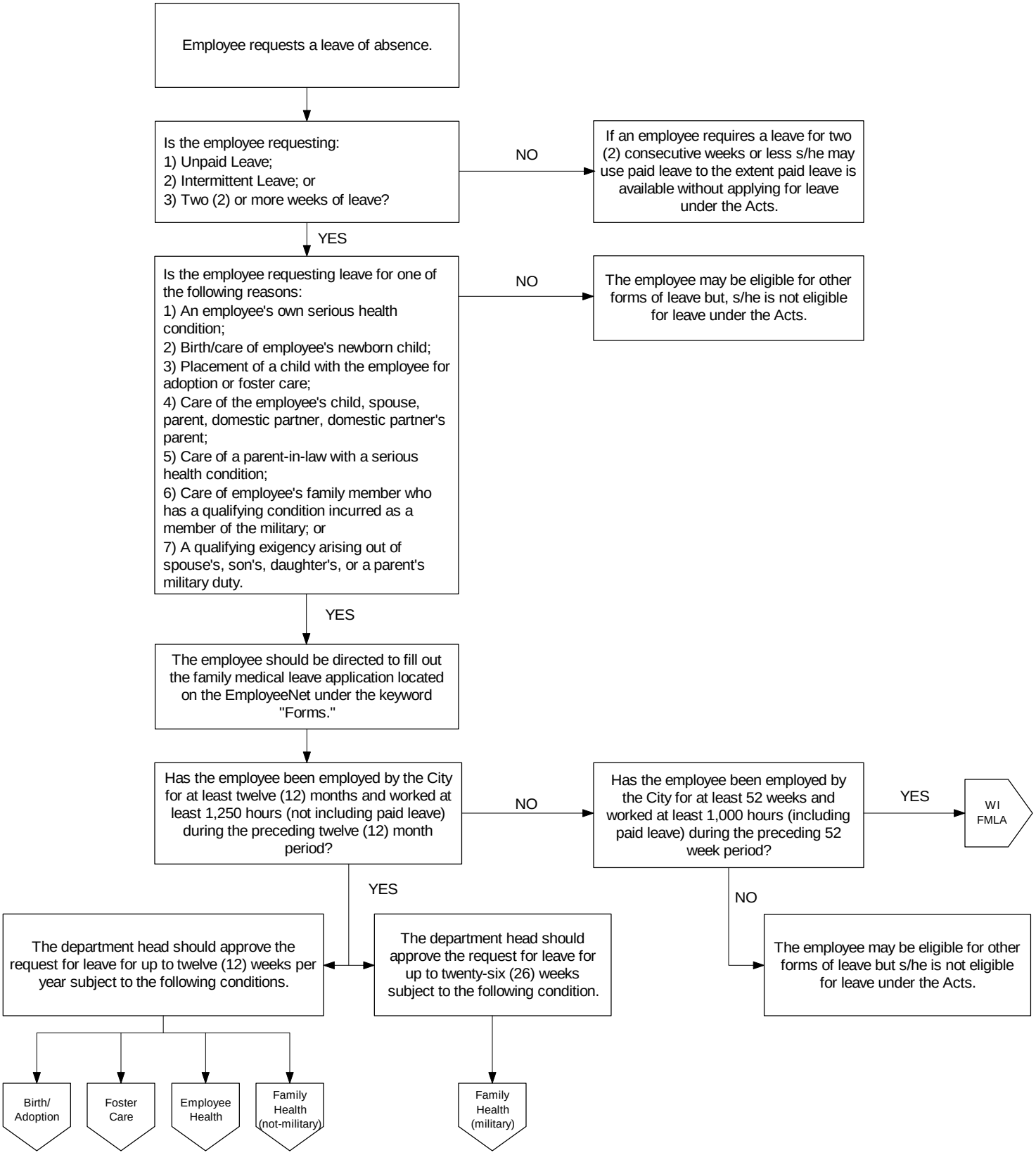
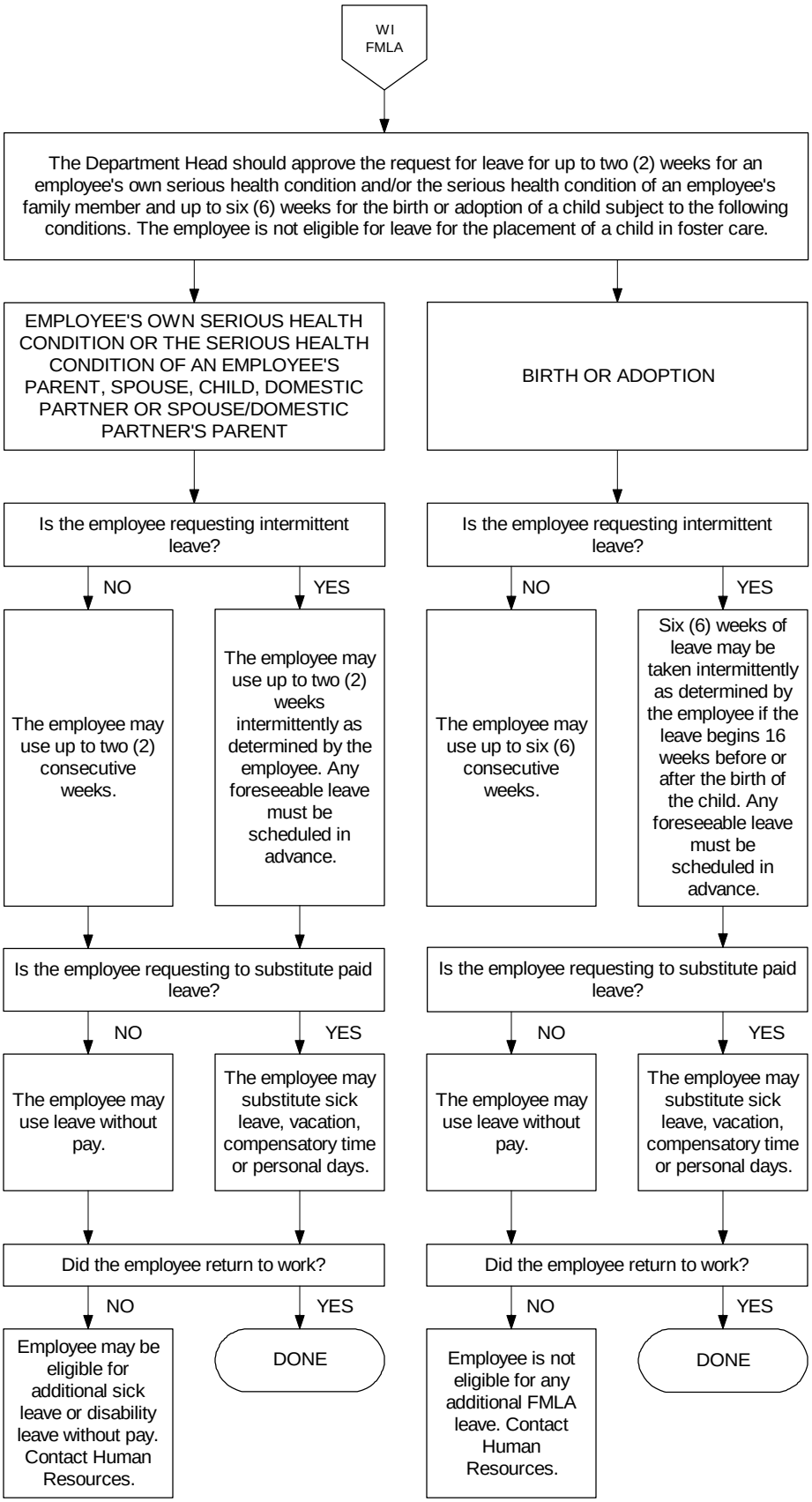
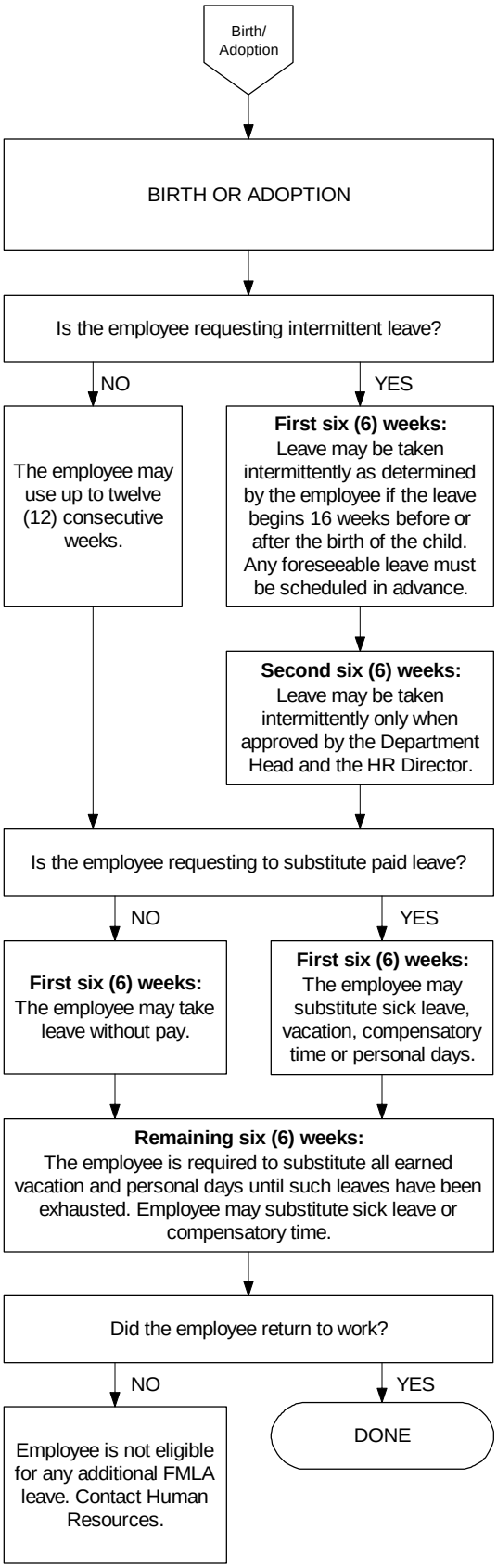
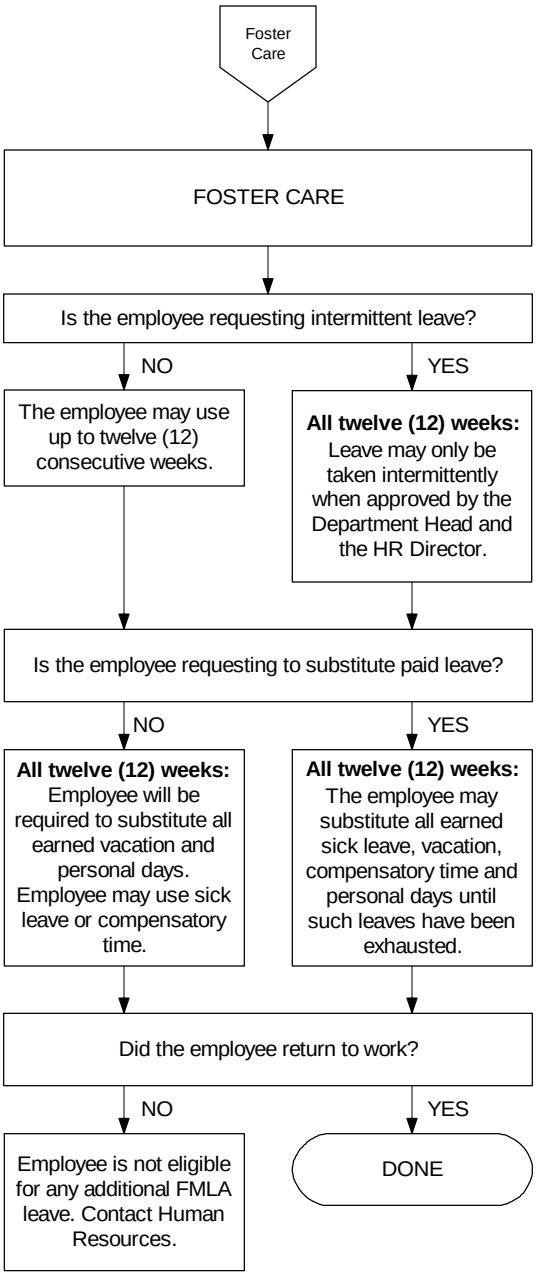
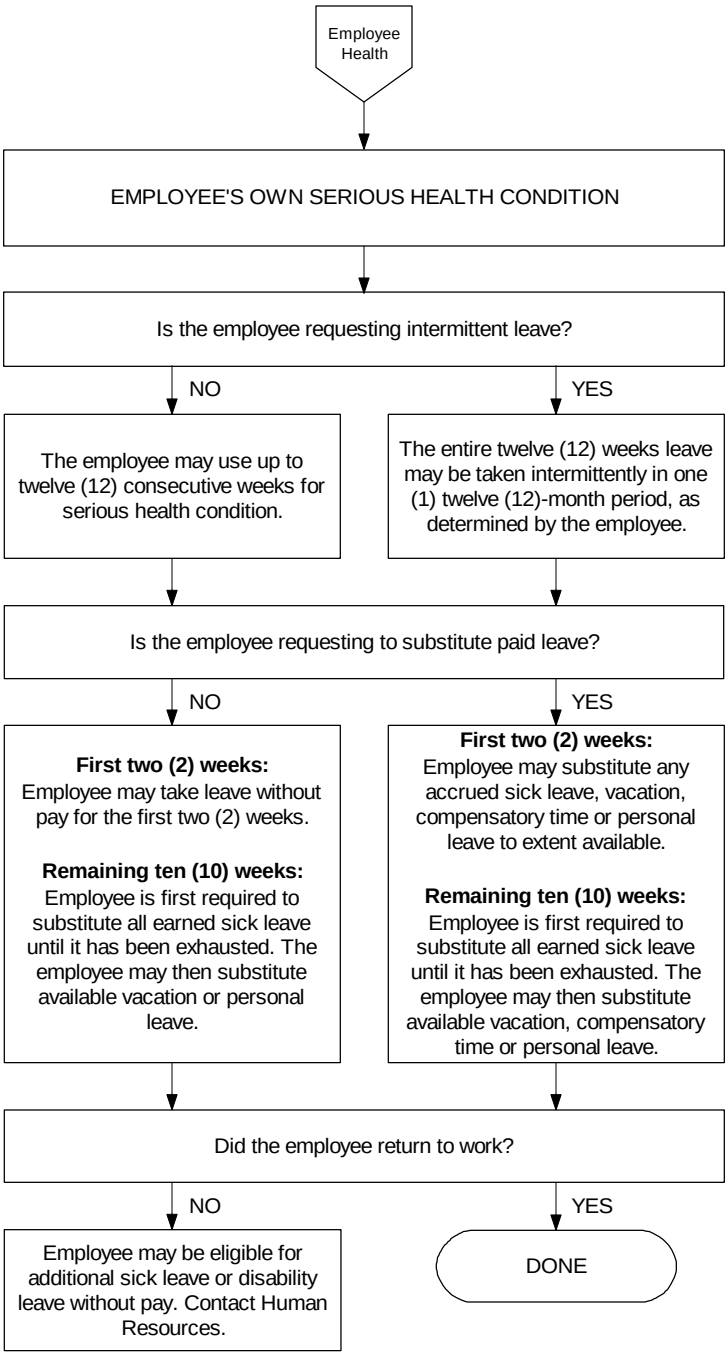
Procedure for the Administration of Family and Medical Leaves of Absence

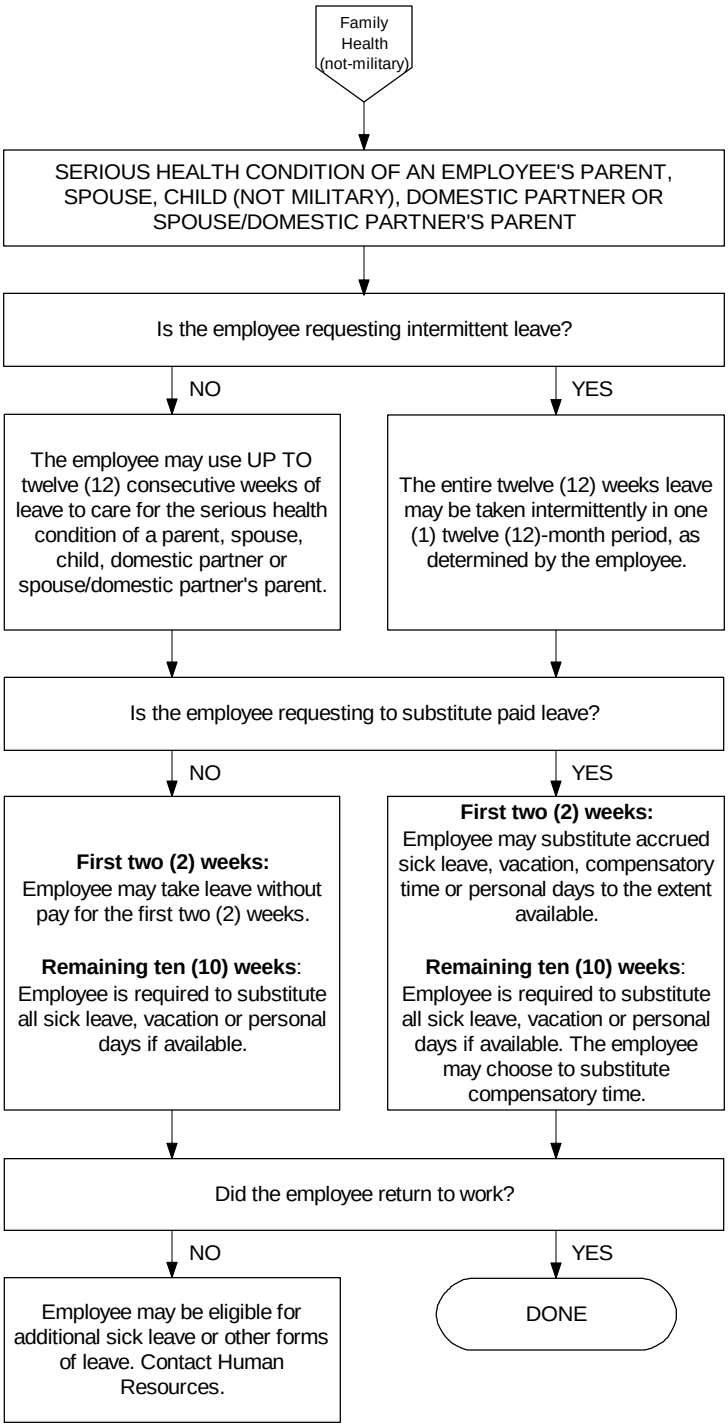


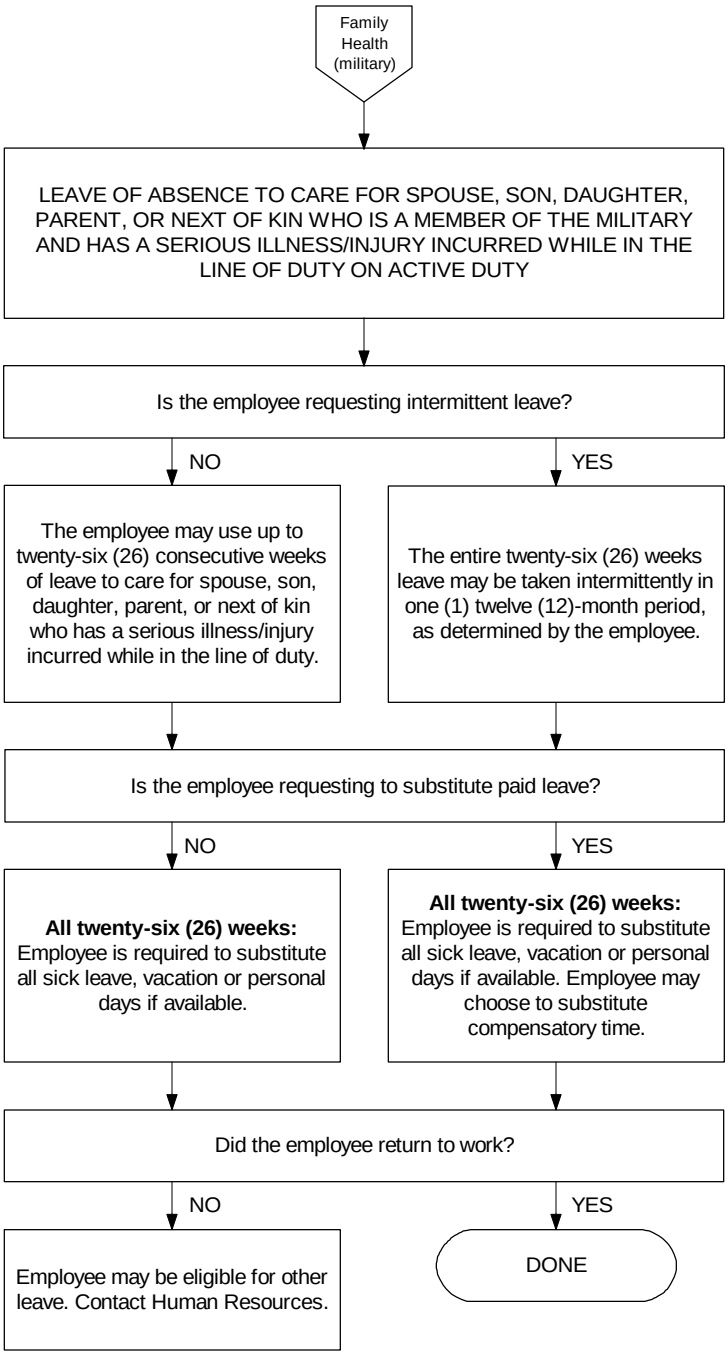

WI FMLA
The Department Head should approve the request for leave for up to two (2) weeks for an employee's own serious health condition and/or the serious health condition of an employee's family member and up to six (6) weeks for the birth or adoption of a child subject to the following conditions. The employee is not eligible for leave for the placement of a child in foster care.
EMPLOYEE'S OWN SERIOUS HEALTH CONDITION OR THE SERIOUS HEALTH CONDITION OF AN EMPLOYEE'S PARENT, SPOUSE, CHILD, DOMESTIC PARTNER OR SPOUSE/DOMESTIC PARTNER'S PARENT
BIRTH OR ADOPTION
Is the employee requesting intermittent leave?
NO
YES
The employee may use up to two (2) consecutive weeks.
The employee may use up to two (2) weeks intermittently as determined by the employee. Any foreseeable leave must be scheduled in advance.
Is the employee requesting intermittent leave?
NO
YES
The employee may use up to six (6) consecutive weeks.
Six (6) weeks of leave may be taken intermittently as determined by the employee if the leave begins 16 weeks before or after the birth of the child. Any foreseeable leave must be scheduled in advance.
Is the employee requesting to substitute paid leave?
NO
YES
The employee may use leave without pay.
The employee may substitute sick leave, vacation, compensatory time or personal days.
Is the employee requesting to substitute paid leave?
NO
YES
The employee may use leave without pay.
The employee may substitute sick leave, vacation, compensatory time or personal days.
Did the employee return to work?
NO
YES
Employee may be eligible for additional sick leave or disability leave without pay. Contact Human Resources.
DONE
Did the employee return to work?
NO
YES
Employee is not eligible for any additional FMLA leave. Contact Human Resources.
DONE


Birth/ Adoption
BIRTH OR ADOPTION
Is the employee requesting intermittent leave?
NO
YES
The employee may use up to twelve (12) consecutive weeks.
First six (6) weeks: Leave may be taken intermittently as determined by the employee if the leave begins 16 weeks before or after the birth of the child. Any foreseeable leave must be scheduled in advance.
Second six (6) weeks: Leave may be taken intermittently only when approved by the Department Head and the HR Director.
Is the employee requesting to substitute paid leave?
NO
YES
First six (6) weeks: The employee may take leave without pay.
First six (6) weeks: The employee may substitute sick leave, vacation, compensatory time or personal days.
Remaining six (6) weeks: The employee is required to substitute all earned vacation and personal days until such leaves have been exhausted. Employee may substitute sick leave or compensatory time.
Did the employee return to work?
NO
YES
Employee is not eligible for any additional FMLA leave. Contact Human Resources.
DONE


Foster Care
FOSTER CARE
Is the employee requesting intermittent leave?
NO
YES
The employee may use up to twelve (12) consecutive weeks.
All twelve (12) weeks: Leave may only be taken intermittently when approved by the Department Head and the HR Director.
Is the employee requesting to substitute paid leave?
NO
YES
All twelve (12) weeks: Employee will be required to substitute all earned vacation and personal days. Employee may use sick leave or compensatory time.
All twelve (12) weeks: The employee may substitute all earned sick leave, vacation, compensatory time and personal days until such leaves have been exhausted.
Did the employee return to work?
NO
YES
Employee is not eligible for any additional FMLA leave. Contact Human Resources.
DONE


Employee Health
EMPLOYEE'S OWN SERIOUS HEALTH CONDITION
Is the employee requesting intermittent leave?
NO
YES
The employee may use up to twelve (12) consecutive weeks for serious health condition.
The entire twelve (12) weeks leave may be taken intermittently in one (1) twelve (12)-month period, as determined by the employee.
Is the employee requesting to substitute paid leave?
NO
YES
First two (2) weeks:
Employee may take leave without pay for the first two (2) weeks.
Remaining ten (10) weeks:
Employee is first required to substitute all earned sick leave until it has been exhausted. The employee may then substitute available vacation or personal leave.
First two (2) weeks:
Employee may substitute any accrued sick leave, vacation, compensatory time or personal leave to extent available.
Remaining ten (10) weeks:
Employee is first required to substitute all earned sick leave until it has been exhausted. The employee may then substitute available vacation, compensatory time or personal leave.
Did the employee return to work?
NO
YES
Employee may be eligible for additional sick leave or disability leave without pay. Contact Human Resources.
DONE


Family Health (not-military)
SERIOUS HEALTH CONDITION OF AN EMPLOYEE'S PARENT, SPOUSE, CHILD (NOT MILITARY), DOMESTIC PARTNER OR SPOUSE/DOMESTIC PARTNER'S PARENT
Is the employee requesting intermittent leave?
NO
YES
The employee may use UP TO twelve (12) consecutive weeks of leave to care for the serious health condition of a parent, spouse, child, domestic partner or spouse/domestic partner's parent.
The entire twelve (12) weeks leave may be taken intermittently in one (1) twelve (12)-month period, as determined by the employee.
Is the employee requesting to substitute paid leave?
NO
YES
First two (2) weeks: Employee may take leave without pay for the first two (2) weeks.
Remaining ten (10) weeks: Employee is required to substitute all sick leave, vacation or personal days if available.
First two (2) weeks: Employee may substitute accrued sick leave, vacation, compensatory time or personal days to the extent available.
Remaining ten (10) weeks: Employee is required to substitute all sick leave, vacation or personal days if available. The employee may choose to substitute compensatory time.
Did the employee return to work?
NO
YES
Employee may be eligible for additional sick leave or other forms of leave. Contact Human Resources.
DONE


Family Health (military)
LEAVE OF ABSENCE TO CARE FOR SPOUSE, SON, DAUGHTER, PARENT, OR NEXT OF KIN WHO IS A MEMBER OF THE MILITARY AND HAS A SERIOUS ILLNESS/INJURY INCURRED WHILE IN THE LINE OF DUTY ON ACTIVE DUTY
Is the employee requesting intermittent leave?
NO
YES
The employee may use up to twenty-six (26) consecutive weeks of leave to care for spouse, son, daughter, parent, or next of kin who has a serious illness/injury incurred while in the line of duty.
The entire twenty-six (26) weeks leave may be taken intermittently in one (1) twelve (12)-month period, as determined by the employee.
Is the employee requesting to substitute paid leave?
NO
YES
All twenty-six (26) weeks: Employee is required to substitute all sick leave, vacation or personal days if available.
All twenty-six (26) weeks: Employee is required to substitute all sick leave, vacation or personal days if available. Employee may choose to substitute compensatory time.
Did the employee return to work?
NO
YES
Employee may be eligible for other leave. Contact Human Resources.
DONE