

FAMILY MEDICAL LEAVE ACT (FMLA)

The Family and Medical Leave Act (FMLA) requires covered employers to provide up to twelve (12)

weeks of unpaid, job-protected leave to "eligible" employees for certain family and medical reasons.

1. For the care of the employee's child (birth, or placement for adoption or foster care);
2. For the care of the employee's spouse, son or daughter or parent. (FUSD also recognizes the following family members: Grandchildren, parents of spouse, brothers or sisters of spouse, brothers or sisters, Sons in law or daughters in law, aunts and uncles, nieces and nephews, grandparents)
3. For a serious health condition that makes the employee unable to perform the employee's job.

When an employee is absent 3 or more days, due to a reason stated above, they should contact Human Resources to discuss their eligibility for FMLA.

The employee is given a packet, which outlines policy regarding leave.

The employee must complete the FMLA Request to Participate/Verification form.

The employee is given the Certification of Physician or Practitioner form for their doctor to complete.

Once these forms are returned, the employee will be sent a letter, confirming if they qualify for FMLA.

Questions? Give JoAnne a call 928-204-6828 or drop an email at jocook@sedona.k12.az.us