

PAID FAMILY LEAVE

Effective July 1, 2020

Paid Family Leave (PFL) provides eligible state employees with paid leave following the birth or placement of a child for adoption. PFL is intended to help provide parents with the means to spend critical bonding time with the child. PFL is available for immediate use by qualifying employees. Full-time employees are eligible for up to 192 hours or 24 hours per week for eight weeks. Part-time employees are eligible for PFL based on the FTE of their position.

Employees should contact the Bureau of Human Resources with any questions.

Date: _____

EMPLOYEE PFL REQUEST:

Employee ID: _____

Name (please print): _____

Hire Date: _____

Department: _____

Employee Supervisor: _____

Dates of Leave Requested: _____

I would like to request PFL for the following reason:

1. For the birth of child: estimated or actual date: _____
2. For the adoption of child: effective placement date: _____

Do you wish to supplement your PFL with sick leave, vacation leave or leave without pay? ☐Y / ☐N

If so, please indicate the order you prefer to use your leave:

Sick ____ Vacation ____ LWOP ____

(You must adhere to your agency's policy on the use of leave without pay.)

The determination of compensation is outlined in the State's policy.

Employee Signature: _____ Date: _____

BHR Approval: _____ Date: _____