# **DELAWARE COUNTY**

Subject	Effective	Supersedes	This Sheet	Total
Request for Leave Procedure	6/28/2004	New	1	3

# 1.0 Purpose

The purpose of this policy is to provide a clear understanding for all employees and supervisors of how to properly utilize and distribute the Request For Leave forms.

# 2.0 Scope

All, supervisors, and employees (including temporary and seasonal employees) of the departments under the jurisdiction of the Delaware County Commissioners and any other appointing authority required to utilize the Request for Leave form.

# 3.0 Distribution

All, supervisors, and employees (including temporary and seasonal employees) of the departments under the jurisdiction of the Delaware County Commissioners and any other appointing authority required to utilize the Request for Leave form.

4.0 Definitions

RFL - Abbreviation for "Request For Leave."

#### 5.0 Policy

"Request For Leave" (RFL) forms are to be completed by employees who are requesting time off for any of the following reasons:

- 1. Medical, dental or optical examinations or treatments
- 2. Personal illness or injury
- 3. Serious illness or injury to an immediate family member
- 4. Death of a family member
- 5. Vacation
- 6. Court leaves including jury duty and subpoena's
- 7. Military leave
- 8. Leave without pay
- 9. Using compensatory time
- 10. Or any other reason not covered by the above.

### Explanations:

Medical, dental or optical examinations or treatments:

• An employee may use accrued sick, vacation or compensatory time for his/her own appointments or for appointments of immediate family members including grandparents, brothers, sisters, parents, spouse, children, grandchildren, and a legal guardian or other person who stands in the place of a parent to the employee for medical, dental or optical exams or treatments. Please specify on the form which type of leave (sick, vacation or comp) will be utilized.

Personal Illness or Injury OR Serious Illness or Injury in Immediate Family Member:

- This section applies when an employee incurs a qualified sick leave occurrence when the employee or the employee's immediate family member is ill or injured and the employee is unable to report to work. The RFL form must be completed and submitted to the supervisor upon the employees first day returning to work or upon the earliest possible convenience.
- An employee requesting to use three or more sick days must have the physician's statement section of the RFL form completed and signed by his/her physician. If a RFL form is not available to the employee, a separate statement completed and signed by the physician is acceptable to attach to the RFL form. If an employee has demonstrated a pattern or frequent use of sick leave (not more than two days at one time, but the sick time usage continues over the course of a few weeks) an employee may also be required to present a completed physician's statement.

# Death:

- Employee must specify who has passed away and what specific date the death occurred. Please specify if you are using sick, vacation or comp time.
- Refer to the appropriate sick leave policy for bereavement guidelines if applicable.

### Vacation:

- Employees must complete the RFL when requesting to use accrued vacation time.
- Employees must obtain approval for the use of compensatory time of more than 2 days if the employee requests to use compensatory time along with accrued vacation time for an employees scheduled vacation.

### Court Leave:

- Employees must complete the RFL when requesting leave for any court appearance or attendance.
- Payment for such leave is subject to the appropriate court leave policy of the employee's appointing authority.

### Military Leave:

• Any employee requesting military leave must complete the RFL form and specify whether the leave is with or without pay. In most instances, an Employee Action Form must also be completed for military leaves of absence.

### Leave Without Pay:

• An employee must complete the RFL form for all requests for leave without pay. An Employee Action form must also be completed in these situations.

# Compensatory Time Used:

• An employee requesting to use accrued compensatory time must indicate this on the RFL form and specify the total number of hours requested.

Employees must complete the top portion of the "Request for Leave" form and submit it to their immediate supervisor for approval. Specific timeframes for submitting these forms may vary by department.

Appointing Authorities may have their own policies on which supervisors may approve or disapprove leave requests. Generally, an immediate supervisor may approve vacation, sick leave or comp time requests without the signature of the appointing authority. An appointing authority must sign and authorize all military leaves or leaves without pay or any type of other leaves as deemed appropriate.

For requests for leave requiring the signature of an appointing authority, the supervisor must sign and date the form and may check if the leave is recommended or not recommended. The supervisor must then forward the form on to the appointing authority to sign and indicate if the leave is approved or disapproved.

#### Distribution:

RFL forms must be distributed according to the directions on the bottom portion of the form. Each individual department is responsible for distributing the appropriate copies to the following departments:

White copy: HR/ Personnel File Canary copy: Auditor Pink copy: Employee Goldenrod Copy: Employee's Department

\*\*\*\* Please Note\*\*\*\*

The canary copy must be submitted to the Auditor's Office for all approved leaves when payroll is submitted for the specific time period that the employee has been granted leave. Please do not send the canary copy to the Auditor's Office without payroll for that pay period.

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An employee may wish to submit the RFL form well in advance of the requested time off. If an employee requests to use vacation time for the requested time off and subsequently accumulates compensatory time, the employee may wish to use the accrued compensatory time in place of the vacation time. The employee is entitled to request the change, subject to supervisory approval. The employee would simply complete another RFL form that would need to be submitted to the appropriate supervisor for consideration. If approved this form must then be distributed to the appropriate departments. The supervisor should indicate in the remarks section that the time had been pre-approved on another form and specify the date the leave was pre-approved.