



Leave of Absence Request Form

Employees may request, in writing, a general leave of absence for a minimum of 6 pay periods and up to a maximum of 26 pay periods once for every 5 years of employment. While on leave, employees continue to accumulate seniority, but vacation and sick leave will not accrue. Employees have the option to continue their health, dental, life and disability benefits. They can subscribe to benefits in full or in part and are responsible to pay the employee and employer cost. Arrangements and payment for benefits must be established prior to the employees last day of work. If arrangements have not been made prior to leaving, the WDM will assume benefits were declined and pause the employees benefits for the duration of their leave. Employees will have the option to make missed PEPP contributions when they return to work.

Employees can consult the Payroll & HR Coordinator about the cost of benefits. More information can be found in **Policy HR28 Vacation/Leaves of Absence/Sick**.

Please complete this form to request a leave of absence and return to your supervisor to submit for approval. *All leaves of absence requests are subject to CEO approval.*

Date: _____

Name: _____

LOA from: _____

LOA to: _____

Comments:

I have read/understood Policy HR28 Vacation/Leaves of Absence/Sick.

Employee Signature: _____

Supervisor Signature: _____ **CEO Signature:** _____

Date Approved: _____