

**Claremont McKenna College
Staff Parental Leave
Application and Request Form**

To apply for a parental leave of absence under the Staff Parental Leave Policy or any other statutory leave of absence for child bonding, you must give your supervisor and Human Resources as much advance notification of your intended absence as possible, but not later than four months prior to the expected beginning of the leave, or as soon as possible after the need for leave becomes known, when it is less than four months. You will also be required to provide your expected return to work date.

Print Employee's Name

I have read the Staff Parental Leave policy and have been given a policy orientation on _____.

Anticipated event date: _____. My Staff Parental Leave will commence on _____
for the birth adoption or foster care placement event. I will provide the required evidence supporting this request.

Initial I understand that it is my responsibility to notify the Human Resources Department **within 48 hours** of the date my parental leave begins. Human Resources can be notified by phone at (909) 621-8490 or by email to hr@cmc.edu.

Initial I understand that this benefit runs concurrently with available statutory paid family leave benefits and that I must apply for paid family leave benefits through the CUC Disability Office to be eligible for this benefit.

Initial I understand that I must augment the 75% of pay under the staff parental leave benefit with accrued vacation time, if available, to approximate no more that 100% of regular pay for up to 12 weeks.

Option

Leave must be taken in one-week increments, with up to two exceptions where the period is at least one day but less than two weeks. Any leave taken under this leave plan must conclude within the 12-month period following the birth, adoption or foster placement event.

My expected return to work date will be _____.

Leaves must be taken in one-week increments with up to two exceptions where the period is at least one day but less than one week. Please specify dates for leave:			
Week 1		Week 7	
Week 2		Week 8	
Week 3		Week 9	
Week 4		Week 10	
Week 5		Week 11	
Week 6		Week 12	
Exception 1		Exception 2	

EMPLOYEE'S SIGNATURE

SUPERVISOR'S SIGNATURE

DATE SIGNED

DATE SIGNED