



CITY OF FAIRFIELD, OHIO

LEAVE REQUEST FORM

Today's date _____

Employee name: _____

Department: _____

I request a leave of absence for _____ day(s) and/or _____ hour(s) from official duty for the following dates: _____

Type of leave requested (see instructions on reverse side of this form):

____ Sick leave – employee
____ Sick leave – immediate family

____ Accumulated sick leave over 90 days. (Three sick leave days for one vacation leave day)

(If family member, indicate relationship)

____ Leave without pay*

____ Vacation leave

____ Exposure to contagious disease which could be communicated to other employees

____ Personal leave

____ Funeral leave: _____
(Indicate relationship and attach documentation)

____ Leave requested in conjunction with FMLA

____ Other leave (explain): _____

____ Maternity/paternity leave*

____ Jury Duty

Signature of Employee _____ Date _____

____ Approved _____ Denied

Signature of Department Head _____ Date _____

Administrative review (where required*): _____
Initial _____ Date _____

____ Approved _____ Denied

Signature of Appointing Authority (where required) _____ Date _____

Comments: _____

* An administrative review by Human Resources is required for a leave without pay, maternity/paternity leave or military leave request.

Payroll certification of leave pay: Date _____ By _____

City of Fairfield

Leave of Absence Request - Instructions

General - Employees requesting leave time should complete the form and submit it through the supervisor for approval by the Department head. As indicated below, some leave requests require the approval of the Appointing Authority. Employees should consult the appropriate Union Contract or City policy for additional information. **YOU MAY USE THE SAME FORM TO REPORT MULTIPLE LEAVES, BUT PLEASE USE A SEPARATE FORM TO REPORT SICK LEAVES.**

Sick Leave - In addition to covering an absence for an employee's personal injury or illness, sick leave can be utilized for absences due to illness, injury or death of an immediate family member. Immediate family members included for this leave are: husband, wife, father, mother, sister, brother, son, daughter, in-laws, step parents and foster parents. Doctor's certificate is required if absence exceeds three (3) working days, or if absence is on either day before or day after a holiday.

Vacation Leave - Since provisions vary, see the appropriate union contract or city policy for instructions.

Personal Leave - Since provisions vary, see the appropriate union contract or city policy for instructions.

Family Medical Leave (FMLA) - Please indicate whether this leave is requested in conjunction with the Family Medical Leave Act. (**Attach FMLA form**)

Maternity/Paternity Leave - Since provisions vary, see the appropriate union contract or city policy for instructions.

Leaves Without Pay - Requests for leave without pay should be accompanied by a written statement from the employee including the reason for the leave; the expected start and end dates for the leave; if health related, a statement from a physician attesting to the need for the leave; and that all other forms of leave have been exhausted. Leave without pay may only be approved by the Appointing Authority. This type of leave for classified employees is also contingent upon approval by the Civil Service Commission. **THESE REQUESTS MUST BE PROCESSED THROUGH THE HUMAN RESOURCES OFFICE.**

Military Leave - Generally, permanent public employees of the City of Fairfield who are performing military duty shall receive pay in accordance with Ohio Revised Code Section 5923.05, but shall not receive payments in excess of those required. A copy of Military Orders is required. Consult the Human Resources Office.

Funeral Leave - To be eligible for payment, an employee must produce some evidence of said death in the form of public notice or its equivalent. For the purposes of this section, "Immediate Family" shall be construed to mean husband, wife, child, mother, father, brother, sister, stepchild, stepmother, stepfather, grandmother, grandfather, grandchild, great grandmother, great grandfather, mother or father of wife or husband, foster parents, son-in-law, daughter-in-law, grandmother or grandfather of wife or husband, brother-in-law or sister-in-law and legal guardians.