



THE SCHOOL DISTRICT OF PALM BEACH COUNTY  
COMPENSATION & EMPLOYEE INFORMATION SERVICES

# Request for Leave of Absence Without Pay

Initial Request                       Extension

If you are submitting this form for an initial leave check "Initial Request" above and complete section A. If you are requesting an extension to an existing leave check "Extension" above and complete section B. **Incomplete forms will not be approved**

Leaves of absence (pursuant to School Board Policy 3.80 or collective bargaining agreement) will be approved by the Superintendent's designee prior to final School Board action. If requesting Family Medical Leave Act (FMLA) attach the appropriate FMLA form (WH-380-E, WH-380-F, WH-384 or WH-385).

Employee #	Employee First Name	Last Name	Social Security # (last 4 digits only) [ ] - [ ] - [ ]
Position		School/Department Name	

<p align="center"><b>SECTION A - INITIAL REQUEST</b></p> <p>Complete this section if this is your first request for leave without pay.</p> <p>Date of last day worked: _____</p> <p>Date of last sick day used: _____</p> <p>_____ Initial here if you are choosing not to use sick days (use only when applying for maternity or sick leave).</p> <p>Expected return date: _____</p>	<p align="center"><b>SECTION B - EXTENSION REQUEST</b></p> <p>Complete this section if your purpose is to extend your initial request for leave without pay.</p> <p>Revised date returning to work: _____</p>
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TYPE OF LEAVE REQUESTED	DOCUMENTATION REQUIRED
<input type="checkbox"/> Sick Leave <input type="checkbox"/> Self <input type="checkbox"/> Immediate Family Member <input type="checkbox"/> Personal Medical FPSU/PBA (attach documentation) <input type="checkbox"/> Workers Compensation	Attach a doctors statement indicating the medical facts to support the need for the leave and the required time of absence by attaching the appropriate FMLA form (WH-380-E, WH-380-F, WH-384 or WH-385).
<input type="checkbox"/> Maternity/Child Care	Attach a doctors statement indicating the pending date of birth using WH-380-E or WH-380-F. Attach a letter indicating date of placement if adoption/foster care.
<input type="checkbox"/> Personal (includes student teaching) <input type="checkbox"/> Administrative & Noninstructional <input type="checkbox"/> Long Term Leave CTA (membership not required) <input type="checkbox"/> Personal Nonmedical FPSU/PBA	Attach a letter from employee outlining the specific need/ hardship.  Personal Non-medical must be approved by Principal/Department Head.
<input type="checkbox"/> Professional CTA (membership not required)/Non-bargaining	Attach a letter from employee indicating the type of professional activity. Non bargaining unit members may apply <b>but</b> require Superintendent's approval.
<input type="checkbox"/> Career Change (can only be used to change to a non-teaching career). CTA membership not required.	Attach a letter from employee indicating the planned career change.
<input type="checkbox"/> Charter School	Attach a hiring letter from the Charter School.
<input type="checkbox"/> Military	Attach appropriate orders when available.
<input type="checkbox"/> Political Leave	No attachments necessary.

**BARGAINING UNIT/GROUP** (check one only)  
 CTA    FPSU    AESOP    PBA    Administrative    Confidential/Miscellaneous    Other

\_\_\_\_\_  
Signature of Employee Making Request                      Date                      Signature of Principal/Department Head                      Date

## REQUEST FOR LEAVE OF ABSENCE WITHOUT PAY DIRECTIONS

1. Use this form to request an **Unpaid Leave of Absence**.
2. Make sure the form is entirely complete and necessary documentation is attached.
3. **Section A - Initial Request:**
  - a. Date of last day worked - Indicate the last day you will be at work.
  - b. Use of sick days:
    - If this is a sick leave and the employee has short or long term disability, it is the employee's choice if they want to use any sick days.
    - If this is a maternity/child care leave it is the employee's choice if they want to use any sick days.
    - Leave date changes must be requested prior to the end of the effective date pay period.

**Note:** Usually if the employee has a short term disability, they use only enough of their sick days to cover the time until their disability starts.

    - If the employee does not have short or long term disability, they must use all their sick days.
    - If the employee is taking a leave to care for a family member, they must use all their sick days.
  - c. Sick days are not to be used for other types of leave.
  - d. Indicate the day you are planning to return to work.
4. **Section B - Extension Request:**

If you are unable to return to work on the original date requested, submit an extension request and a new return date.

**Note:** Extensions to Maternity/Child Care leaves do not require additional documentation.
5. Type of leave Requested - check the appropriate leave requested and attach necessary documentation.
  - **Sick leaves** are for all employees and can be used for their own illness or to care for a family member. This leave can be extended for the remainder of one school year and the entire next school year.
  - **Maternity/Child Care leaves** are for all employees. Employees may use up to 15 sick days prior to delivery and up to 30 days after delivery (or 45 days after a cesarean section.) Requesting use of sick days must be decided and clearly stated when applying for maternity/childcare leave. Once leave has been processed dates will not be changed. This leave is also used for adoption and foster care and only teachers can use the allowable 30 or 45 sick days. All other employees will not be eligible to use sick days for this leave. Maternity/childcare leave may be granted for a maximum of 18 months but it must be continuous. Once an employee returns from this leave, they may not go back out on leave.
  - **Personal leaves** are granted at the discretion of the Board with the exception of FPSU. Each request is reviewed on a case by case basis and supporting documentation is required in order to make a fair determination based on undue hardship. Long Term leaves are granted at the discretion of the Board with the exception of FPSU. Each request is reviewed on a case by case basis and supporting documentation is required in order to make a fair determination based on undue hardship.
  - **Professional leaves** are for teachers and non-bargaining unit members only and must be applied for by May 1st for the upcoming school year. This type of leave is designed to cover a full school year unless exceptions are made by the administration. Teachers must have completed at least one satisfactory school year and must engage in activities that will enrich their teaching profession. The Superintendent must authorize approval for Non-bargaining unit members.
  - **Career Change leaves** are for teachers only and must be applied for by May 1st for the upcoming school year. This type of leave is for one complete year unless exceptions are made by the administration. Teachers must have completed at least 5 years of teaching with Palm Beach County School District and wish to venture off into another career other than teaching. This leave is allowed only once and will not be extended or granted thereafter.
  - **Charter School:** Non-instructional employees may only apply to South Tech and Inlet Grove. All employees must submit a letter from the charter school indicating hiring dates. All charter school applications must be received in Compensation & Employee Information Services by June 1st, for the following school year.
  - **Military:** Attach appropriate orders when available.
  - **Political:** Any employee who has filed to run for political office and is desirous of unpaid leave for political reasons shall make application for such leave and shall be entitled to it. The employee shall not be restricted to one (1) leave during a political campaign; however, if possible, leave shall be requested for the duration of the campaign. Leave shall be taken for all absences for political campaigning.
  - **FPSU and PBA Employees:** All leaves (except Maternity/Child Care) are considered personal and may be limited to 90 work days. Leaves for strictly personal reasons are approved by the Principal or Department head. Sick leaves are approved by the District.
6. Bargaining Unit/Group - check one.
7. Sign the form.
8. Your Principal/Department head is signing this form to acknowledge that they know you are going on leave. Their signature is not an approval except for Personal leaves for FPSU and PBA employees. All other leaves are approved by the Department of Compensation & Employee Information Services.
9. Leave date changes must be requested prior to the end of the effective date pay period.