1. Employee Eligibility

Cal Poly Pomona offers leave of absence opportunities to eligible employees in accordance with the College Bargaining Agreements, CSU policy and practice, state and federal law, and without regard to race, color, creed, ancestry, national origin, gender, sexual orientation, religion, age, veteran status, disability, or any other protected status.

2. Completion of the Leave of Absence Request Form

A leave of absence application needs to be completed to request approval for any absence (with or without pay) of more than 15 working days (including intermittent leaves that total more than 15 working days), unless the absence is due to the following:

Exceptions
- Vacation requests that are not for Family Medical Leave (FML) purposes;
- Faculty personal leaves without pay that are not for FML purposes;
- Faculty Professional Leave, Difference-In-Pay (DIP) Leave, and/or Sabbatical Leaves.

(Note: The faculty leaves listed above must be requested using the specific form(s) required by Faculty Affairs.)

A leave of absence form does not need to be completed if the leave (with or without pay) is for 15 working days or less. However, a separate Family Medical Leave (FML) Notice and Request Form may be required for absences of more than three (3) workdays for faculty and five (5) workdays for staff when the absence is due to the employee’s own serious health condition and/or to provide care for a seriously ill/injured family member in accordance with Family Medical Leave (FML).

3. Employee’s Responsibility

A. The employee is responsible for submitting the Leave of Absence Application to the Leave Coordinator at least 30 days in advance of a planned leave of absence. Emergency requests of less than 30 days will be considered. The Leave Coordinator will review the leave request and forward it to the Department Chair/HEERA Manager for review/approval. It is the employee’s responsibility to alert their manager of the pending application and request for leave.

B. For medical and family care leaves, an original medical certification must be submitted. When the leave is foreseeable, and at least 30 days notice has been provided, the employee shall provide the medical certification with the Leave of Absence Application. When this is not possible, the medical certification must be submitted within 15 calendar days of the date the leave request is made or when requested by the Leave Coordinator. Note: Approval of the leave may be withheld until the appropriate medical certification is submitted to the Leave Coordinator.

C. A “health care provider” is defined very broadly to include doctors of medicine or osteopathy, podiatrists, dentists, clinical psychologists, optometrists, chiropractors, nurse practitioners, nurse-midwives, and Christian Science practitioners. Christian Science practitioners must be listed with the First Church of Christ in Boston, Massachusetts. All other providers must be authorized to practice under state law and must be performing
within the scope of their practice. In addition, chiropractors are considered a health care provider only if the treatment consists of manual manipulation of the spine to correct a subluxation as demonstrated by x-ray.

The certification must include the following information (this certification need not, but may, at the employee’s option, identify the serious health condition involved):

<table>
<thead>
<tr>
<th>For employee’s own illness/injury, the medical certification must include:</th>
<th>To care for a family member, the medical certification must be from the family member’s treating health care provider and must include:</th>
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<tbody>
<tr>
<td>- The date the serious health condition commenced (if known).</td>
<td>- The date the serious health condition commenced (if known).</td>
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<tr>
<td>- Probable duration of condition. (Beginning and ending date of disability).</td>
<td>- Probable duration of condition. (Beginning and ending date of disability).</td>
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<tr>
<td>- A statement that, due to the serious health condition, the employee is unable to work at all, or is unable to perform any one or more of the essential functions of his/her position.</td>
<td>- An estimate of the amount of time which the health care provider believes the employee needs to care for the child, parent or spouse.</td>
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<tr>
<td>- A statement that the serious health condition warrants the participation of the employee to provide care during a period of treatment or supervision of the child, parent or spouse.</td>
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D. If the leave request is due to the employee’s own medical disability and is not work-related, the employee should contact Payroll Services for eligibility/application for Non-industrial Disability Insurance (NDI) benefits.

E. A Leave of Absence Application must be completed to amend the leave dates for an existing and/or previously approved leave. If amending the dates for a medical leave and/or a Family Care leave, a new Medical Certification Form is required.

F. Requests for an early return from leave and/or extension must be submitted following the same procedures outlined above as for requesting the initial leave.

### 4. Manager’s Responsibility

A. The manager is responsible for ensuring that the employee follows appropriate procedures for requesting a leave of absence.

B. The manager is responsible for monitoring return-to-work dates.

C. Prior to the employee’s return-to-work from a medical leave, it is the manager’s responsibility to ensure that the employee has submitted documentation from the treating health care provider that indicates the employee is able to return-to-work.

D. Whenever possible and reasonable, modified work duties will be made available to the employee in accordance with operational needs of the University and based upon the employee’s restrictions.
5. Family Medical Leave Information:

The California State University (CSU) provides Family Medical Leave (FML) in compliance with both the federal Family and Medical Leave Act (FMLA) and the California Family Rights Act (CFRA). FML provides eligible employees with up to 12 weeks of unpaid, job-protected leave for certain family and medical reasons.

All full-time and part-time employees (excluding student employees) employed for at least one academic year or 12 months (not necessarily continuously) preceding the leave are eligible. Student employees are eligible but have different eligibility criteria. Student employees (includes Teaching Associates) must be employed at least one year (not necessarily continuously) and must have worked at least 1,250 hours in the 12 months preceding the leave to be eligible.

Employees are entitled to FML leave under a variety of circumstances:

- To care for a child following birth or placement with the employee for adoption or foster care,
- To care for the employee’s spouse, child, or parent who has a serious health condition, and
- If the employee is unable to perform the essential functions of his/her own job due to a serious health condition.

If the leave you are requesting meets federal and state Family and Medical Leave (FML) requirements, you should be aware of the following rights and obligations:

A. The period of this leave will be counted as federal/state Family and Medical Leave in determining your future eligibility for additional FML.

B. If your leave is due to a serious health condition (either your own, your spouse’s, parent’s, or child’s), you must provide medical certification within 15 days. Approval of your leave may be withheld until you comply with certification requirements. Prior to returning to work, you will be required to present a “fitness-for-duty” certificate if the leave is due to your own health condition.

C. Unless you are covered by a bargaining agreement which states otherwise, your personal holiday and any accumulated vacation leave credits will be used prior to placing you on unpaid leave of absence. If appropriate, accumulated sick leave may be used as mutually agreed upon by you and the appropriate administrator. CTO leave credits may also be used, but will not be counted towards the Family Medical Leave entitlement.

D. For the period of unpaid FML, the CSU will continue to pay its portion of your medical, dental, and vision premiums. An accounts receivable will be established for any employee premiums required during unpaid leave. If you wish to discontinue medical coverage during the unpaid leave, you may reinstate it upon return.

E. If you do not return from FML, the CSU will require you to reimburse it for medical, dental, and vision premiums paid on your behalf during the unpaid portion of your leave. However, no reimbursement will be required if you do not return because of a serious health condition or if you are unable to return due to circumstances which are outside of your control.

F. Upon your return to work, you have the right to reinstatement to the same position or to another position with equivalent benefits, pay and conditions of employment. However, you will have no different rights than if you were actively at work rather than on leave; this exception could affect your reinstatement in the case of layoffs, for example.
6. General Information:

A. A leave of absence for pregnancy, childbirth and recovery therefrom, shall be considered a medical leave. If the requested leave includes family/parental leave, the dates of this leave shall be noted as such on the initial Leave of Absence Application.

B. The time spent on unpaid leave of absence may affect the following (refer to the applicable Collective Bargaining Agreement or contact Human Resources):
   a. Credit as part of any required probationary period
   b. Scheduled or recommended pay increases
   c. Service toward sick leave and vacation accrual
   d. Points toward the accumulation of seniority points
   e. Accumulation of service credit in the California Public Employees' Retirement System (CalPERS)

C. An employee on approved leave is entitled to return to the same position or another position with equivalent benefits, pay, and conditions of employment. The employee on leave has no different rights than if s/he were actively at work.

D. When appropriate and when requested by the President or delegated authority, an employee granted a Leave of Absence shall provide verification that the conditions of the leave were met.

E. If this Request for Leave of Absence is in conjunction with an approved application for NDI benefits, medical, dental and vision premiums as well as any other miscellaneous deductions will continue to be deducted from NDI checks. If the employee is still unable to return to work when NDI benefits and FML leave are exhausted, premiums may be paid on direct pay basis (see Item G. below). It is the employee’s responsibility to contact the Benefits Coordinator regarding continuation of benefits on a direct pay basis.

F. An employee on a Leave of Absence Without Pay (that is not designated as FML) for more than one full pay period may elect to continue his/her health benefits (medical, dental, and/or vision) at his/her own expense. Upon written request from an eligible employee, Benefits/Human Resources shall provide a procedure for continued payment of the employee’s insurance premium(s) including medical, dental and vision benefits during the period of an unpaid Leave of Absence. During this period, the employee shall pay both the employee's and the CSU's contributions. The employee shall pay all contributions prior to the date each payment is due. If the employee chooses not to continue the payments, the coverage will be suspended and will be reinstated automatically on the first day of the month following return to pay status, provided there is sufficient pay for premiums to be deducted.

Questions:

Questions regarding Leave of Absence, Family Medical Leave (FML), the Catastrophic Leave Donation Program (CLDP) should be directed to Krista Shea, Leaves Coordinator, by telephone at 909-869-2067, or by e-mail at klshea@cpp.edu.

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