

ASE and GSR LEAVE FROM EMPLOYMENT REQUEST FORM



SECTION I – EMPLOYEE INFORMATION		
NAME:	EMPLOYEE ID:	
EMAIL:	TELEPHONE:	
HIRING DEPARTMENT/UNIT:	JOB TITLE:	APPOINTMENT %:

SECTION II – LEAVE REQUEST – See reverse for leave types and eligibility		
REQUEST TYPE: ☐ Initial Application ☐ Amendment to an approved leave that began on:	LEAVE TERM: ACADEMIC YEAR _____ ☐ Fall ☐ Winter ☐ Spring ☐ Summer	
HAVE YOU TAKEN LEAVE FROM EMPLOYMENT BEFORE DURING THE SAME ACADEMIC YEAR? ☐ No ☐ Yes – Provide Leave Type and Dates:		
LEAVE TYPE:		
I AM REQUESTING TO TAKE:	(MM/DD/YYYY)	(MM/DD/YYYY)
☐ Paid Leave	Begins on _____	and Ends on _____
☐ Unpaid Leave	Begins on _____	and Ends on _____
☐ Anticipated Return to Work Date – <i>only if returning to work in the same academic term:</i> _____		
NOTE: An employee returning to work from leave due to pregnancy, childbirth, or related medical condition, or for a serious health condition must complete and return the Return to Work Certification Form to the AP Leave Administrator prior to the return to work date by fax at: (805) 893-7712 or by email to: ap-leave@ucsb.edu.		
FOR OTHER LEAVES – Provide a brief explanation for the leave or attach supporting documentation to the request form.		
IS THIS A REQUEST FOR INTERMITTENT LEAVE? ☐ No ☐ Yes – For the care of a family member or newborn/placed child: attach proposed work schedule For a serious health condition and PDL : include the Certification of Healthcare Provider Form		
EMPLOYEE SIGNATURE:	DATE:	

SECTION III – HIRING DEPARTMENT DECISION	
☐ Your requested leave is approved ☐ Your requested leave is not approved for the following reason(s):	
SUPERVISOR NAME:	TITLE:
SIGNATURE:	DATE:

LONG-TERM LEAVE

Purpose: For the following reasons:

- A serious health condition – **requires** the Certification of Healthcare Provider [Employee's Serious Health Condition Form](#)
- To care for and bond with a newborn child or adopted child, or foster care – **requires** the [Declaration of Relationship Form](#)
- To care for a family member with a serious health condition – **requires** the [Declaration of Relationship Form](#)
- Pregnancy, childbirth or related medical conditions for the period prior to, during, and after childbirth – **requires** the Certification of Healthcare Provider [Pregnancy Disability Form](#).

Duration: Paid leave for up to 8 weeks per academic year. Additional unpaid leave may be granted but shall not exceed the end date of appointment.

Request Process: Complete and submit Page 1 of the Request Form along with the assigned supplemental documentation to the Hiring Department for review and determination. The Hiring Department shall submit the approved leave documents to the Office of Academic Personnel for processing as an extended absence in the UCPath Absence Management module. No addition time reporting is required in Kronos.

SHORT-TERM LEAVE

Purpose: For the following reasons:

- Personal illness and/or disability
- Birth, adoption, or care of a child or family member
- Family emergencies
- Appointments and/or hearings scheduled by federal immigration officials or the U.S. Department of State with respect to immigration or citizenship status of the ASE/GSR, spouse, domestic partner, child or parent

Duration: Paid leave for up to 2 days per quarter. Additional unpaid leave may be granted but shall not exceed the end date of appointment.

Request Process: Request Form is submitted to the Hiring Department for review and determination. ASE/GSR may be asked to provide additional supporting documentation.

Reporting Leave in Kronos:

- 1) Select the appropriate position in the *Assignment* Column
- 2) Select the appropriate *Pay Code*:
 - For Associates, TAs, and GSRS:
 - For paid leave - ASE-GSR ShortTerm Leave – Salaried
 - For additional unpaid leave –ASE/GSR Unpaid Time Off
 - For Readers and Remedial Tutors:
 - For paid leave - ASE-GSR ShortTerm Leave – Hourly
 - For additional unpaid leave – Do not need to report unpaid time off
- 3) Enter the total work hours corresponding to the assigned FTE% in the *Amount* Column (ex: 50% FTE = 4 hours. 25% FTE = 2 hours)
- 4) Repeat for each approved day off
- 5) Click *Save* and *Approve* before the end of the pay period

BEREAVEMENT

Purpose: For leave due to the death of a family member

Duration: Paid leave for up to 5 calendar days per occurrence. Additional paid leave may be granted at the Hiring Department's discretion. Leave shall not exceed the end date of appointment.

Request Process: Request Form is submitted to the Hiring Department for review and determination

Reporting Leave in Kronos:

- 1) Select the appropriate position in the *Assignment* Column
- 2) Select the appropriate *Pay Code*:
 - For Associates, TAs, and GSRS:
 - Select - ASE-GSR Bereavement-Salaried
 - For additional unpaid leave –ASE/GSR Unpaid Time Off
 - For Readers and Remedial Tutors
 - Select - ASE-GSR Bereavement-Hourly
 - For additional unpaid leave – Do not need to report unpaid time off
- 3) Enter the total work hours corresponding to the assigned FTE% in the *Amount* Column (ex: 50% FTE = 4 hours. 25% FTE = 2 hours)
- 4) Repeat for each approved day off
- 5) Click *Save* and *Approve* before the end of the pay period

JURY DUTY

Purpose: For required jury duty service

Duration: Paid leave for the duration of actual jury duty service. Leave shall not exceed the end date of appointment.

Request Process: Request Form is submitted along with the jury duty summons to the Hiring Department for review and determination.

Reporting Leave in Kronos:

- 1) Select the appropriate position in the *Assignment* Column
 - For Associates, TAs, and GSRS:
 - Select *Hours Worked* and enter "0" Hours worked in *Amount* Column. Right click, select Comments, and select Jury Duty from drop down list.
 - For Readers and Remedial Tutors
 - Select *Hours Worked* and enter the number of assigned hours in *Amount* Column. Right click, select Comments, and select Jury Duty from drop down list. Right click, select Comments, and select Jury Duty from drop down list. The total work hours shall correspond to the assigned FTE% (ex: 50% FTE = 4 hours. 25% FTE = 2 hours)
- 2) Repeat for each approved day off
- 3) Click *Save* and *Approve* before the end of the pay period

OTHER LEAVES

Purpose: For other leaves, including, but not limited to, leave for service to government agencies and leave to attend professional meetings

Duration: Paid or unpaid leave granted at the Hiring Department's discretion. Leave shall not exceed the end date of appointment

Request Process: Request Form is submitted to the Hiring Department for review and determination. ASE/GSR may be asked to provide additional supporting documentation.

Reporting Leave in Kronos:

- 1) Select the appropriate position in the *Assignment* Column
 - For Associates, TAs, and GSRS:
 - Select *Hours Worked* and enter "0" Hours worked in *Amount* Column. Right click, select Comments, and select the appropriate leave type from drop down list and include a comment, if needed.
 - For Readers and Remedial Tutors
 - Select *Hours Worked* and enter the number of assigned hours in *Amount* Column. Right click, select Comments, and select the appropriate leave type from drop down list and include a comment, if needed. The total work hours shall correspond to the assigned FTE% (ex: 50% FTE = 4 hours. 25% FTE = 2 hours)
- 2) Repeat for each approved day off
- 3) Click *Save* and *Approve* before the end of the pay period