Personal Medical & Family-Related Leaves for Graduate Student Researchers (GSRs)

Eligibility

Graduate Student Researchers are eligible for a temporary leave from employment in accordance with established campus policies. To the extent possible, a leave request shall be submitted a minimum of 30 calendar days’ notice in advance of the anticipated begin date or as soon as possible if the leave is unforeseeable. Leave requests are granted at the discretion of the Department Chair or Director.

Leave Types

Parental Leave: Under Red Binder VI-4, a GSR will receive up to six (6) weeks of paid leave for pregnancy, childbirth, or related medical conditions for the period prior to, during, and after childbirth. Additional two weeks of unpaid leave may be granted for baby bonding.

Sick Leave: Under Red Binder VI-3, a GSR will receive up to four (4) weeks of paid leave due to the GSR’s serious health condition or to care for a family member who has a serious health condition. This leave may also be used to care for and bond with the GSR’s newborn child or a child placed with the GSR for adoption or foster care. Additional two weeks of unpaid leave may be granted for baby bonding or for a serious health condition.

The period of combined paid parental and sick leave may not exceed six (6) weeks within an academic year. Approved leaves may not extend beyond the appointment end date.

Instructions

1) Prepare the leave letter on Department letterhead. Provide the ASE with the original, signed letter.

2) PPS Entry: Enter the student’s paid leave in PPS using the leave bundle. The DOS code will be LWS - Leave with Salary for paid status and LNS - Leave no salary if approved for additional unpaid leave. The appropriate Leave of Absence Action Code for the particular leave must be used (Consult with HR-Benefits). If the student plans to take a combination of leave with pay and leave without pay, the two leaves will need to be entered separately, starting first with the paid leave followed by the unpaid leave. Leaves may not extend beyond the ASE’s appointment end date.

3) Distribute copies as follows:
   a) Department file: copy of all documents
   b) Graduate Division: copy of leave letter and PPS appointment entry
   c) Academic Personnel: copy of leave letter

Last updated on: 11/2017
(Date)

(Employee’s Name)
(Employee’s Address)

RE: GSR Personal Medical/Family-Related Leave

Dear (Employee’s Name):

The (Department) has approved you for a leave of absence from employment for (Select from the following one):

- Pregnancy Disability, Childbirth, or Relation Medical Conditions
- Personal health condition
- Caring for a family member with a serious health condition
- Baby bonding

Your paid leave will be from (begin date) to (end date) at (percent time). The additional period of unpaid leave will be from (begin date) to (end date) - If applicable. You are expected to return to your position at the normal time on (return date). The total leave period shall not exceed the current appointment end date.

Your leave time will accrue hours towards your fee remission eligibility and therefore you may still qualify for a fee remission benefit. If you have questions about your benefits please contact (Department Contact).

We wish you well and hope to see you back soon.

Sincerely,

(Department Chair)

cc: Graduate Division
    Academic Personnel