**Operating Procedure No. 5404P**

**Human Resources**

**FAMILY, MEDICAL, AND MATERNITY LEAVE**

**Conditions of Family Medical Leave (FML)**

Family Medical Leave may be granted, with or without pay, to employees upon their request for a period of time not to exceed 12 weeks.

**Notice Requirements**

An employee who intends to request FML shall complete a [Leave Request Form](https://pugetsoundesd.sharepoint.com/:b:/r/my/hr/Shared%20Documents/HR%20Forms/FMLA%20Request%20Form.pdf?csf=1) and submit to the Human Resources Office at least 30 calendar days in advance of the intended dates of leave or as soon as practicable.

**Leave Options**

At the time of notification, the employee shall specify in writing which of the following options she/he intends to utilize during the requested leave period. If more than one of the following options is requested, the employee shall specify the exact number of days requested for each option.

Leave options are:

1. Care for the employee’s newborn child, an adopted child who is under the age of eighteen at the time of placement for adoption, or a newly placed foster child;
2. Care for a spouse, parent or child of the employee who has a serious health condition;
3. For a serious health condition that makes the employee unable to perform his or her job.

**Employee Rights under Family Medical Leave**

If an employee uses no more than 12 work weeks of leave during any rolling 12-month period, the employee may be returned to the position he/she left, if the position is still funded and available. If not, the employee will be considered for any other position opening for which he/she is qualified and with equivalent benefits and pay. This section does not apply if the position is eliminated by a restructuring, or reduction in force, or if the employee fails to provide timely notice or fails to return on the established ending date of leave.

An employee shall retain the benefits accrued before the leave. The employee will receive health benefits during the leave, provided the employee pays his/her share of the contribution and other benefits may be retained at the employee's expense. Subject to human resources approval, an employee may take a reduced leave schedule.

In the case of maternity leave, employees that don’t qualify for family medical leave under the FMLA are eligible for maternity leave for the period in which they are disabled during pregnancy and/or following childbirth, subject to medical certification.

Employees who feel their rights to the above provisions have been violated may utilize grievance procedures contained in the PSESD operating policies or the collective bargaining agreement or may file a complaint with the Washington State Department of Labor and Industry.

**Employer Rights under Family Medical Leave**

The employer may deny job restoration to a salaried employee who is among the highest paid 10% of employees.

The employer shall require medical confirmation from a licensed healthcare provider for all requests governed under this policy. The employer may, at the employer's expense, obtain an opinion from a second health care provider of the employer's choosing.

The employer may recover the premium that the employer paid for maintaining coverage for the employee under any group health plan during any period of unpaid leave.

Adopted: November 1980

Revised: May 1983

Revised: June 1990

Revised: September 1993

Revised: May 1994

Revised: February 2014