PLEASE READ CAREFULLY

The Family and Medical Leave Act of 1993 requires the Newton County School System to provide up to twelve (12) weeks of unpaid, job-protected leave during a 12-month period for certain family and medical reasons. All employees of the Newton County School System having worked at least 12 months and have 1,250 service hours in the 12 months before the start of leave are eligible for FMLA leave. FMLA provides that if the employee returns to work prior to or on the first scheduled day following the 12 weeks of approved FMLA leave, the employee will be reinstated to the same job or an equivalent job with the same pay, benefits, and terms and conditions of employment.

There are two types of Family and Medical Leave:
- Block FMLA – Consecutive days or weeks of leave.
- Intermittent FMLA – Leave taken on separate occasions on an as-needed basis.

The following conditions qualify for Family and Medical Leave:
- For incapacity due to pregnancy, prenatal care or child birth and to care for the newborn child within the first 12 months after birth;
- Adoption or foster placement with the employee of a son or daughter and to care for the newly placed child within the first 12 months after placement.
- When an employee is unable to work because of his/her own serious health condition.*
- To care for the employee’s spouse, parent or child with a serious health condition.**
- Military Family Leave Entitlements for Qualifying Exigencies – Eligible employees whose spouse, son, daughter or parent is on (or has been notified of an impending call to) covered active duty in the Armed Forces. Qualifying exigencies may include attending certain military events, arranging for alternative childcare, addressing certain financial and legal arrangements, attending certain counseling sessions, and attending post-deployment reintegration briefings, among other things.
- FMLA also includes a special leave entitlement that permits eligible employees to take up to 26 weeks of leave during a single 12-month period to care for the employee’s spouse, parent, son or daughter or next of kin who is covered service member with a serious injury or illness incurred in the line of duty on active duty that may render the service member medically unfit to perform the duties of his or her office, grade, rank or rating. A covered service member is: (1) a current member of the Armed Forces, including a member of the National Guard or Reserves, who is undergoing medical treatment, recuperation or therapy, is otherwise in outpatient status, or is otherwise on the temporary disability retired list, for a serious injury or illness*; or (2) a veteran who was discharged or released under conditions other than dishonorable at any time during the five-year period prior to the first date the eligible employee takes FMLA leave to care for the covered veteran, and who is undergoing medical treatment, recuperation, or therapy for a serious injury or illness.*

*Serious Health Condition:
- Any period of incapacity or treatment connected with inpatient care (an overnight stay) in a hospital, hospice, or residential medical care facility; or
- A period of incapacity lasting more than five calendar days that also involves a visit to a health care provider and a regimen of continuing treatment; or
- Any period of incapacity due to a pregnancy or prenatal care; or
- Any period of incapacity that is permanent or long-term due to a condition for which treatment may not be effective (stroke, terminal diseases, etc.); or
- Any period of incapacity or treatment for a chronic serious health condition; or
- Any absences to receive multiple treatments for, by, or on referral from a health care provider for a condition that would likely result in incapacity for five or more days if left untreated (chemotherapy, physical therapy, dialysis).
**NOTE:** In-laws, grandparents, siblings and other extended family members are NOT covered by FMLA.

**WHEN DO I NEED TO REQUEST FMLA?** If you meet one of the aforementioned qualifications, you may apply for FMLA leave. A 30-day notice of pending leave is required when the leave is foreseeable.

**WHAT ARE THE STEPS TO BE TAKEN?**

- Discuss the leave with your principal or local supervisor. The department/school protocol concerning reporting out must always be followed.
- Complete the *Request for Family / Medical Leave* form and submit to the proper leave clerk, supervisor or other appointed individual.
- Have your Health Care Provider complete the medical certification form that you receive; either electronically or hard copy. The medical certification form must be completed and returned within fifteen (15) calendar days after you have received it.

Failure to submit all proper FMLA documentation (including supporting documentation such as medical certification) as required could result in denial of FMLA-protected leave and possible disciplinary action. Excessive absences (consecutive and/or cumulative) not covered by FMLA can result in an attendance/performance issue and possible disciplinary action.

**HOW MUCH LEAVE CAN BE TAKEN?** Under FMLA, the maximum is 12 weeks (60 full work days) in a 12-month period. The 12 weeks in a 12-month period will be measured from the first date FMLA leave is used. If the FMLA leave is for a serious health condition, the dates provided by the health care provider will be used to approve leave. You cannot request additional time unless ordered by your health care provider. However, for the birth of a child, you may request additional time for the care of your child during his/her first year. In addition, time off due to a Workers’ Compensation injury or illness will be counted as FMLA time if the injury or illness also qualifies as FMLA leave. An employee can apply and be approved for FMLA due to multiple reasons; however, the combination for all reasons cannot exceed 12 weeks per FMLA 12 month period. (The special FMLA Leave entitlement to care for a covered military service member is an exception.)

If both spouses are employees of the School District and request leave for the birth, placement of a child by adoption or for foster care, or to care for a parent with a serious health condition, they only will be entitled to a maximum combined total leave (12) weeks in any 12-month entitlement period. If either spouse (or both) uses a portion of the total 12-week entitlement for one such purposes, each is still entitled to the difference between the amount he or she has taken individually and the 12-week entitlement for FMLA leave for other FMLA purposes during any 12-month entitlement period.

**DO I TAKE PAID LEAVE OR UNPAID LEAVE?** The employee is required to use all paid leave, (sick/personal and/or vacation) available to him/her. The available paid leave runs concurrently with FMLA leave and is “substituted” for any unpaid FMLA leave. At the time paid leave is exhausted, Leave Without Pay (LWOP) will be entered. Please keep in mind the cut off dates for payroll. For each day (or partial day) that you do not have paid leave, your pay will be reduced by your daily or hourly rate of pay. Please contact the Business Office for guidance.

**DO MY BENEFITS CONTINUE UNDER FMLA LEAVE?** When you are receiving a paycheck with sufficient funds, benefit deductions continue. When paid leave is exhausted and the funds are not sufficient, you are required to pay for your benefits to avoid loss of coverage. Please contact the Business Office for guidance. *Note: Failure to remit timely premiums may result in loss of coverage.*

**WHAT IF I NEED TO EXTEND MY FMLA?** If the period of leave needs to be extended beyond the original approved period (within the 12-week FMLA maximum), the employee should notify their principal/supervisor as soon as possible and complete a new *Request for Family / Medical Leave* form which must be submitted prior to the last day of approved (original) leave. Employees should direct the request to the Human Resource Department for approval.

**WHAT IF MY DISABILITY LASTS BEYOND THE MAXIMUM FMLA LEAVE PERIOD?** If you are not able to return to work prior to or on the first scheduled day immediately following the maximum approved FMLA 12-week leave period and the reason is due to your (the employee’s) serious health condition, you may qualify for Extended Medical Leave (EML). With the appropriate medical documentation (updated Certification of Health
WHAT DO I NEED TO DO TO RETURN FROM FMLA? If the leave was due to a serious health condition of the employee a completed *Fitness for Duty Certification* form from the treating health care provider addressing release to return to work must be submitted to the Human Resources Department and/or the principal/supervisor. The employee’s return to work is dependent upon receipt of this documentation. This must be done prior to or on the first day of return to work. The employee must always coordinate/confirm return to work (in advance) with their principal/supervisor.

Upon receipt of the FMLA request and completed medical certification, a notification letter will be mailed to the employee from the Human Resources Department regarding their leave status.

**NOTE:** To avoid pay discrepancies, please ensure the appropriate leave forms are completed and submitted to your leave entry designee at your work location as soon as possible. Upon return to work, the employee should notify their work location leave entry designee as well as the Human Resources Department of their return to work date. This can be done by email (preferably), telephone or note sent via school mail to the Human Resources Department.

All FMLA related forms can be obtained from the Newton County School System website; [http://www.newtoncountyschools.org/departments/human-resources.aspx](http://www.newtoncountyschools.org/departments/human-resources.aspx) or upon request from your work location or the Human Resources Department.

If you have any questions regarding FMLA, please contact the Human Resources Department at 770-787-1330.