

ARCHDIOCESE OF CHICAGO



Human Resources

P.O. Box 1979
Chicago, IL 60690-1979

PERSONAL LEAVE-OF-ABSENCE REQUEST FORM

The employee must provide 30 days advance notice of the need to take personal leave when the need is foreseeable. When 30 days is not possible, the employee must provide notice as soon as practicable and generally must comply with the location's normal call-in process. If you are requesting a leave of absence for your own illness or that of an immediate family member, use the FMLA Leave -of- Absence Request form.

NAME: _____ PARISH/SCHOOL/AGENCY: _____

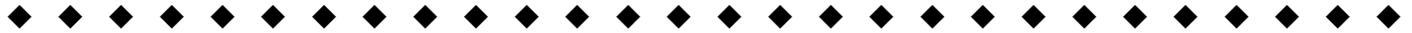
POSITION: _____

I hereby request that I be granted a leave of absence from _____ - _____ - _____ to _____ - _____ - _____ for the following personal reason(s):

Signature: _____ Date: _____

This request is is not recommended for approval.

Supervisor's Signature: _____ Date: _____



EMPLOYEE'S STATEMENT:

I understand that if granted a leave of absence as requested above, I am expected to return to work on or before _____. Should circumstances make it impossible for me to return by that date, I must apply for an extension before the expiration of my original leave. I understand that such extension will be subject to management approval and may be denied. I also understand the following:

1. Personal leaves are granted for a maximum of 90 days.
2. I am still considered an employee of the Archdiocese of Chicago while I am on leave.
3. If I seek or accept other employment while I am on leave, even if temporary in nature, the Archdiocese will consider such action to be a voluntary termination of employment.
4. If I file a claim for Unemployment Compensation while I am on leave, the Archdiocese will consider such action to be my voluntary termination of employment.
5. My health, dental, short-term disability, and supplemental life insurance will remain in force while I am on leave if such benefits were in force for me prior to going on leave. However, I must still remit to the Archdiocese the amount that would normally be deducted from my pay for such benefits.
6. My time spent on an approved leave of absence will be credited toward the accrual of my vacation benefits, provided I return within the maximum 90-day leave period and on a full-time or benefits-eligible, part-time basis. If I fail to return within the maximum 90-day leave period, or if I return only on a part-time basis, I will be entitled only to the unused vacation benefits, if any, I had accrued prior to going on leave.

(OVER)

