

FMLA/UNIVERSITY LEAVE OF ABSENCE/RETURN FROM LEAVE OF ABSENCE

TUID	ORG	DEPARTMENT NAME
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EMPLOYEE'S NAME (LAST NAME, COMMA, FIRST NAME OR INITIAL, SPACE, MIDDLE NAME OR INITIAL)	DATE COMPLETED
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ACTIONS 02 - LOA WITH PAY 03 - LOA WITHOUT PAY 04 - RETURN FROM LEAVE	ACTION(S)	EMPLOYMENT STATUS A - ACTIVE L - LEAVE OF ABSENCE W/ITHOUT PAY F - LEAVE OF ABSENCE/FULL PAY P - LEAVE OF ABSENCE/PARTIAL PAY	EMP STAT	STATUS DATE (LAST PAID DAY)	LOA REASON CODE * <i>*SEE PAGE 2 FOR REASON CODES*</i>
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LOA RETURN DATE (MM/DD/YY)	HOLD POSITION (IF LOA) <input type="checkbox"/> YES <input type="checkbox"/> NO
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APPROVALS			
AUTHORIZING SIGNATURE	DATE	AUTHORIZING SIGNATURE	DATE
PRINTED NAME	TELEPHONE #	PRINTED NAME	TELEPHONE #

NOTES:	COMPLETE THE FIELDS BELOW FOR FACULTY STUDY LEAVE ONLY	
	CURRENT BASE:	LEAVE OF ABSENCE BASE:
	<i>USE THE ADDITIONAL PAGE IF REDISTRIBUTION OF ACCOUNTS IS NECESSARY.</i>	

DO NOT WRITE IN SHADED AREAS BELOW THIS LINE – FOR HR USE ONLY

<input type="checkbox"/> RETURNED FROM LOA	DATE	CONTINUATION OF BENEFITS: <input type="checkbox"/> YES <input type="checkbox"/> NO	DATE
<input type="checkbox"/> DID NOT RETURN FROM LOA			

HR APPROVAL	DATE
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FUND	ORG	ACCT	PROG	OLD RATE/ AMT	ERN	OLD%	STOP DATE MM/DD/ CCYY	FUND	ORG	ACCT	PROG	NEW RATE/ AMT	ERN	NEW%	START DATE/ STOP DATE MM/DD/CCYY

LOA REASON CODES AND DESCRIPTIONS

02-UNIVERSITY MILITARY LEAVE
04-UNIVERSITY PERSONAL LEAVE
05-UNIVERSITY MEDICAL LEAVE
06-UNIVERSITY STUDY LEAVE

08-WORKERS' COMP
15-LONG TERM DISABILITY
16-ADMINISTRATIVE LEAVE (FOR HR USE ONLY)
18-FAMILY & MEDICAL LEAVE