PERALTA COMMUNITY COLLEGE DISTRICT

UNPAID LEAVE OF ABSENCE REQUEST

(Please retain a copy for your records)

Employee Name: ______Dept/College _____Date: _____

Che	ck one:Mana	gement	Faculty	Classified		
Sub	ject: Unpaid Leave of Al	bsence Request				
	Note: Submission of this form is NOT an authorized leave until it has been reviewed and signed by					
	your Manager/Supervisor.					
	Employee Note: Submission of this form is NOT an authorized leave until it has been reviewed and signed by your Manager/Supervisor, the Director of Human Resources.					
	Manager/Supervisor Note: Once you have received notice of Human Resources Approval, you are responsible to generate the applicable ePAF (Electronic Personnel Action Form) and route to Human Resources with the original Leave Request form.					
Date(s) Req	uesting as unpaid leave	FROM:		TO:		
Reason for L	eave:	(11				
	(Use additional sheets if necessary)					
Applicable Union Contract Language: (excerpts)						
	*Local 39 <u>Article 9.5 Leaves Section Leave Without Pay</u>					
Any permanent employee with six (6) months or more of service may be granted a leave not to exceed one (1) year of service.						
*S.E.I.U Local 1021 Article 13 Leaves Section 13.14 Leave Without Pay "A leave of absence may be granted on an unpaid basis to an employee, such leave not to exceed two (2) years. Unpaid leaves used to accept permanent or trial employment elsewhere shall be considered a voluntary resignation by the employee. 13.14.1 Medical, dental, life, and long-term disability insurance carried by the bargaining unit employee through the District may, with the carrier's and the District's approval, be continued at the expense of the employee on leave without pay." Please refer to the bargaining agreement for more information.						
**Pe	**Peralta Federation of Teachers Article <u>26 Leaves</u>					
"A. Leave of Absence Regular and probationary employees may be granted a leave of absence for a period equivalent to two (2) successive semesters, exclusive of summer session. Upon return from such authorized leave, the employee shall be reinstated into the position occupied at the time of the granting of such authorized leave. Leaves may be extended upon request for a maximum of two years." N. Long-term Personal Necessity Leave 1. Any faculty member shall, with eight (8) weeks advance notice, be granted a leave of absence without pay for personal reasons. The leave shall be granted for no less than one (1) semester, with the provision that such leave shall not extend beyond the end of the academic year in which the leave is granted. 5. The eight (8) week advance stipulated above shall be waived in the event of documented protracted illness of a family member as defined by this agreement."						
Print Your Name		Job Title		Signature	Date	
(Employee)						
(Supervisor)						
(Director of HR)						

Revised: 7/31/2019