



DEPARTMENT OF EMPLOYEE RELATIONS

April 4, 2022

Paid Parental Leave Eligibility Form

TO: (Employee Name)
FROM: (Employer Representative)
DATE:
On \_\_\_\_\_, you informed us that you needed leave beginning on \_\_\_\_\_ for:
[ ] Birth of a child
[ ] Incapacity related to pregnancy or serious health condition after childbirth
[ ] Stillbirth after 20 weeks of pregnancy (for birthing parent only)
[ ] Miscarriage prior to 20 weeks of pregnancy (for birthing parent only)
[ ] Legal placement of a child under the age of five years for adoption or foster care
[ ] Non-legal placement of a child under the age of five years

Eligibility Status
This Notice is to inform you that you:
[ ] You have met the eligibility requirements to apply for Paid Parental Leave.
[ ] You have not met the eligibility requirement to apply for Paid Parental Leave as you have worked less than 1,000 hours in the preceding 12 months.
Documentation Requirements
As explained above, you meet the eligibility requirements for Paid Parental Leave. In order to have your leave approved, please provide the following documentation by \_\_\_\_\_ (date).
(If documentation is requested, employers must allow at least 15 calendar days from receipt of this notice; additional time may be required in some circumstances.) Please return this documentation to the Department of Employee Relations Leave Administration Coordinator by fax at (833) 816-1918, or hand deliver to DER in a sealed envelope, marked confidential. If sufficient information is not provided in a timely manner, your leave may be denied.
[ ] Sufficient certification to support your request for leave due incapacity for your serious health condition. A certification form that sets forth the information necessary to support your request [ ] is [ ] is not enclosed.
[ ] For stillbirth or miscarriage: medical certification of serious health condition or death certificate.
[ ] Birth certificate or equivalent documentation of birth.
[ ] A certified copy of a court order granting legal custody.

For non-legal placement of a child: two (2) official records establishing employee as the named caregiver and documentation establishing the date of placement.

**If your leave does qualify** as Paid Parental Leave, your leave may be taken as follows:

1. Employees are entitled to six weeks of paid parental leave for the birth of a child or placement of a child under five years of age for adoption, foster care, legal guardianship or non-legal placement in an in loco parentis situation.
2. Employees are entitled to six weeks of paid parental leave for stillbirth after 20 weeks of pregnancy.
3. Birthing parents are entitled to four additional weeks of paid parental leave for their own serious health condition or incapacity due to childbirth.
4. Birthing parents who experience stillbirth or miscarriage before 20 weeks are entitled to two weeks of paid parental leave.
5. If also entitled to FMLA leave, paid parental leave will run concurrently with FMLA.
6. Paid parental leave must begin within 16 weeks of the qualifying event and may be used in a continuous block or intermittently for eligible qualifying events. Intermittent use of parental leave shall only be utilized in the case of birth or placement qualifying events. The last segment of intermittent use of parental leave must begin within the 16-week period. If both parents are City employees, leave may be taken concurrently or separately so long as it commences within 16 weeks of the qualifying event. Additional parental leave is not available if an employee has more than one qualifying event in a single calendar year.

Once we obtain the information from you as specified above, we will inform you, within 5 business days, whether your leave will be designated as paid parental leave. If you have questions please do not hesitate to contact your departmental FMLA leave administrator, \_\_\_\_\_ at (414)\_\_\_\_\_.