

**Professional Staff Leaves and Absences  
(Federally-mandated Family Leave)**

**Notification and Reporting**

When the need for leave for the birth or adoption of a child or for planned medical treatment is foreseeable, the employee must provide at least 30 days prior notice unless circumstances dictate otherwise. With respect to foreseeable treatments of an employee's family members, the employee must make a reasonable effort to schedule treatment so as not to disrupt district operations.

In cases of illness, the employee is required to report periodically on the leave status and intention to return to work.

**Intermittent or Reduced Leave**

When instructional employees seek intermittent leave in connection with a family or personal leave and when such leave would constitute at least 20 percent of the total number of working days in the period during which the leave would extend, the district may require the employee to take leave in a block (not intermittently) for the entire period or transfer to an available alternative position within the school system that is equivalent in pay, for which the employee is qualified and which better accommodates the intermittent situation.

**Basic Conditions**

The district will require medical certification to support a claim for leave for an employee's own serious health condition or to care for a seriously ill child, spouse or parent. The basic certification will be sufficient if it contains the date on which the condition commenced, the duration of the condition and any appropriate medical information.

For an employee's own medical leave, the certification also must include a statement that the employee is unable to perform the functions of his position. For leave to care for a seriously ill child, spouse, or parent, the certification must include an estimate of the amount of time the employee is needed to provide care.

In its discretion, the district may require a second medical opinion and periodic recertification at its own expense. If the first and second opinions differ, the district at its own expense may require the binding opinion of a third health care provider approved jointly by the district and the employee.

A "Request for Family and Medical Leave of Absence Form" must be originated in duplicate by the employee. This form should be completed in detail, signed by the employee, submitted to the immediate supervisor for proper approval and forwarded to the personnel department. If possible, the form should be submitted 30 days in advance of the effective date of the leave. All medical information provided to the district through this process shall be treated as confidential.

### **Reinstatement**

Employees who have taken a leave due to a personal health condition will be required to provide certification by their physician that the employee is able to resume work.

### **Repayment of Benefits**

In the event that an employee elects not to return to work upon completion of an approved unpaid leave of absence, the district may recover from the employee the cost of any payments made to maintain the employee's group health insurance coverage unless the failure to return to work was due to a continuation, recurrence or onset of a serious health condition as certified by a physician that entitles the employee to leave or for other reasons beyond the employee's control.

Benefit entitlement based upon length of service will be calculated as of the last paid work day prior to the start of the unpaid leave of absence.

### **Posting/Notice to Employees**

Building principals/administrators will post notices explaining the Family and Medical Leave Act's provision in locations where they can be readily seen by employees.

**Adopted by the Telluride Board of Education June 30, 1999**

Sample regulation revised 1993