

MEMORANDUM

Administrator Instructions: This form is to be used by leave administrators who are responsible for providing employees with Family and Medical Leave Act (FMLA) information. This form will be used to designate leave as Parental Leave when employee does not qualify for FML. This form must be submitted to the employee **within five business days** of the employee's request for FMLA leave, or within five business days of the department's knowledge that a FMLA condition may be present. If unable to meet with employee, send FMLA packet via certified mail or via email as agreed upon by the employee. Contact Engineering Human Resources at engineeringhr@tamu.edu or 979.458.7699 if you have questions. **Please do not use abbreviations on any fields.**

Date:

Department:

Departmental FMLA Administrator completing form:

FMLA Administrator Contact Phone Number:

Employee Name:

Employee UIN:

Subject: Request and/or Designation of Leave Under Texas Parental Leave Act (not eligible for FMLA coverage)

On _____ (date) you notified us (or we became aware) of your need for leave due to the birth of a child or placement of a child younger than 3 years of age for adoption or foster care. Our records indicate that you are **not eligible** for leave under the Family Medical Leave Act because you have not met all of the requirements to qualify. You:

Do not have 12 months of state service

Have not worked 1,250 hours within the 12 months of your need for leave

Have more than 12 months of state service, but you have had a break in service of seven (plus) years (12 months of service will need to be completed)

You have exhausted your FMLA leave allocation (12 weeks) during this fiscal year

Therefore, you are entitled to Parental Leave under the state's Parental Leave Act (PLA). Parental Leave

- Is provided each fiscal year **only** for the birth of a child or placement of a child for adoption or foster care younger than 3 years of age
- Will expire 12 weeks after the date of birth or 12 weeks after the first day an adoptive or foster child is placed in the home
- Intermittent or reduced hour leave is permitted but the proposed work schedule must be agreed upon by the supervisor

I will need Parental leave for

Date of natural childbirth: _____

Date of child placement into home for adoption or foster care: _____

Please note the following additional information regarding Parental Leave:**1. Parental Leave Requests, Documentation Requirements, and Procedures**

- The attached medical certification form or other acceptable documentation must be returned to your department within **15 calendar days of your receipt of this notice**. Your failure to provide sufficient documentation by that time may delay or prevent your receipt of Parental Leave or paid leave benefits.
- Please provide your department with your estimated dates of any requested Parental Leave as soon as possible.
- For the **adoption** of a child, you must submit a brief written statement to your department specifying the child's age, the anticipated or actual date of placement into your home, and the number of days of Parental Leave requested. Proof of the placement of a **foster** child in your home must also be provided.
- **Mothers:** If applicable, you will be required to provide a medical certification for usage of sick leave related to pregnancy/birth and present a fitness-for-duty certificate stating that you can safely return to work and perform your duties. Lack of clear documentation may result in the delay of your return to work until sufficient information is received.
- **Fathers:** Sick leave absences must be supported by appropriate medical documentation.

2. Paid and Unpaid Leave

- Mothers
 - Appropriate paid leave (sick, vacation, compensatory time, etc.) will be used for doctor appointments, prenatal visits, and medical recovery after childbirth.
 - Leave without pay will be applied where appropriate. Parental Leave starts at the date of birth or child placement into home for adoption or foster care.

- Fathers
 - Appropriate paid leave (sick, vacation, compensatory time, etc.) will be used for medical appointments, prenatal visits, and care for the child and/or mother before and after childbirth.
 - Leave without pay will be applied where appropriate. Parental Leave starts at the date of birth or child placement into home for adoption or foster care.
 - Paid and unpaid leave will run concurrently with your parental leave; all rules and regulations regarding paid and unpaid leave will apply to your absences.
3. You will be required to remain in contact with your supervisor and provide updates every two weeks. We will expect you to return to work as indicated by the applicable physician's statement(s) and/or your approved leave request. You will be required to return a fitness-for-duty certificate in the event you are missing work due to your own health condition prior to or on the day of your return to work date.
 4. You will be responsible for making applicable monthly payments toward your health insurance during Parental Leave. Please contact Engineering Benefits at (979) 458-7699 or engineeringhr@tamu.edu if you have questions about your premium payments and or benefits. Your group health coverage for dependents and optional coverage may be cancelled as allowed by TAMUS policies if payments are not made in a timely manner.
 5. **Parental Leave Rules and Regulations**
 - Section 11 of *System Regulation 31.03.05 – Family and Medical Leave*
 - [Texas Statute 661.913](#)
 6. **Employee Signature Provisions**
Your signature below shows acknowledgment of receipt of this notification and also advises you of the following:
 - a. You have reviewed the entire contents of this memorandum (along with any attachments) upon receipt and will contact appropriate personnel in your department if you have questions regarding your Parental Leave.
 - b. Your leave may not be designated as Parental leave unless you following the documentation requirements specified in item #2. You must contact your supervisor in the event you are unable to provide documentation by the deadline requested.
 - c. You must remain in contact with your work area as required by your department's policies and the Texas A&M Engineering Experiment Station. We will expect you to return to work as indicated by the applicable physician's statement(s). If the circumstances of your leave change and you are able to return to work earlier than the date indicated on your latest doctor's statement, you must notify us at least two work days prior to the date you intend to report for work so that we can make the appropriate arrangements. Your failure to provide us with the requested notice may result in a delay of your return to work.
 - d. Your paid and/or unpaid leave will run concurrently with any Parental leave. Paid vacation and sick leave must be exhausted before you are placed in a leave without pay status. Your available balances are Sick _____, Vacation _____, and Other Leave _____. You may take unpaid leave if you are otherwise not eligible for paid leave.
 - e. You must advise your administrator if your condition changes or if the circumstances of your parental leave change.
 - f. **Important:** Please note the following regarding your Parental Leave balance:
 - Your Parental Leave must be documented via a leave request in Workday. You will also be required to submit a leave request for paid/unpaid leave (such as sick, vacation, etc.) Contact your department's leave administrator in the event you are unable to access your Parental Leave balance or if you are not in a leave-eligible position (student employee, wage employee, etc.)
 - You are responsible for notifying appropriate department personnel in a timely manner if you believe your Parental Leave balance is incorrect.
 - g. System Regulation 31.03.05 – *Family and Medical Leave* governs your use of Parental Leave. You may obtain a copy of this regulation from your administrator or view the regulation at: <http://policies.tamus.edu/31-03-05.pdf>
 - h. State or other FMLA regulations may apply to your leave if unique circumstances are otherwise not covered in this memorandum or applicable attachments.
 - i. If you have received this information on *behalf* of an employee, you must provide this information to the employee as soon as possible.
 - j. You are encouraged to contact Engineering Human Resources at 979-458-7699 if you feel your Parental Leave rights have been violated.

Signatures:

My signature indicates I have provided Parental Leave information to the employee or his/her designee.

FMLA Administrator:

Date:

My signature indicates I have received and understand the Parental Leave information provided in Item 6 above.

Employee/Designee:

Date:

FORM DISTRIBUTION:

- **Employee**—Submit this signed form to your department's FMLA Administrator.
- **FMLA Administrator**—Provide a copy of this signed form to the employee; attach return receipt, if sent through certified mail, to department copy

QUESTIONS?

Contact *Engineering Human Resources*
Phone: 979-458-7699
Email: engineeringhr@tamu.edu