



LITTLE ROCK
SCHOOL DISTRICT

Human Resources Department
810 W. Markham Street
Little Rock, Arkansas 72201
Main office number: 501-447-1100
Fax: 501-447-1162

FAMILY AND MEDICAL LEAVE ACT (FMLA) COVER SHEET

Please be advised that to be eligible for job protected leave in accordance with the Family and Medical Leave Act (FMLA) for up to 12 weeks or 60 work days, you must have been employed by the Little Rock School District for at least 12 months and physically worked 1,250 hours over the previous 12 months.

Today's Date _____

Name _____

Employee ID# or last four digits of social security number _____

Street Address _____

City, State, Zip Code _____

Primary Location _____

Position Title _____

Phone Number / Alternative Number _____

Prior Leave of Absence (Date) _____

Qualifying reason for the medical leave of absence request:

- ☐ The birth of a child, **OR** placement of a child with you for adoption or foster care, and to bond with the newborn or newly-placed child (within one year of birth or placement)
- ☐ Your own serious health condition that makes you unable to perform the essential functions of your job.
- ☐ You are needed to care for your family member due to a serious health condition. Your family member is your:
____ Spouse ____ Parent ____ Child under age 18 ____ Child 18 years or older and incapable of selfcare because of a mental or physical disability
- ☐ A qualifying exigency arising out of the fact that your family member is on covered active duty or has been notified of an impending call or order to covered active duty status. Your family member on covered active duty is your:
____ Spouse ____ Parent ____ Child of any age
- ☐ You are needed to care for your family member who is a covered servicemember with a serious injury or illness. You are the servicemember's:
____ Spouse ____ Parent ____ Child ____ Next of kin

Type of leave requested:

- ☐ Continuous leave
- ☐ Intermittent or reduced work schedule

Request start date _____

Anticipated end date _____

I understand that I am required to submit a completed FMLA Certification of Health Care Provider form and submit the form to the Human Resources Department at least thirty (30) days before my leave commences. Should my medical leave request be approved, I understand that my medical leave will run concurrently with my accrued leave. In the event that I go into an unpaid status while on an approved unpaid medical leave of absence, I understand that I must pay my portion of health insurance premiums. I understand that I must provide a medical leave release from my treating physician prior to returning to work.

- ☐ I have read and understand the above statements.

Employee's Signature _____

Date _____

EMPLOYEE RIGHTS AND RESPONSIBILITIES UNDER THE FAMILY AND MEDICAL LEAVE ACT

Basic Leave Entitlement

FMLA requires covered employers to provide up to 12 weeks of unpaid, job-protected leave to eligible employees for the following reasons:

- For incapacity due to pregnancy, prenatal medical care or child birth;
- To care for the employee's child after birth, or placement for adoption or foster care;
- To care for the employee's spouse, son or daughter, or parent, who has a serious health condition; or
- For a serious health condition that makes the employee unable to perform the employee's job.

Military Family Leave Entitlements

Eligible employees with a spouse, son, daughter, or parent on active duty or call to active duty status in the National Guard or Reserves in support of a contingency operation may use their 12-week leave entitlement to address certain qualifying exigencies. Qualifying exigencies may include attending certain military events, arranging for alternative childcare, addressing certain financial and legal arrangements, attending certain counseling sessions, and attending post-deployment reintegration briefings.

FMLA also includes a special leave entitlement that permits eligible employees to take up to 26 weeks of leave to care for a covered servicemember during a single 12-month period. A covered servicemember is a current member of the Armed Forces, including a member of the National Guard or Reserves, who has a serious injury or illness incurred in the line of duty on active duty that may render the servicemember medically unfit to perform his or her duties for which the servicemember is undergoing medical treatment, recuperation, or therapy; or is in outpatient status; or is on the temporary disability retired list.

Benefits and Protections

During FMLA leave, the employer must maintain the employee's health coverage under any "group health plan" on the same terms as if the employee had continued to work. Upon return from FMLA leave, most employees must be restored to their original or equivalent positions with equivalent pay, benefits, and other employment terms.

Use of FMLA leave cannot result in the loss of any employment benefit that accrued prior to the start of an employee's leave.

Eligibility Requirements

Employees are eligible if they have worked for a covered employer for at least one year, for 1,250 hours over the previous 12 months, and if at least 50 employees are employed by the employer within 75 miles.

Definition of Serious Health Condition

A serious health condition is an illness, injury, impairment, or physical or mental condition that involves either an overnight stay in a medical care facility, or continuing treatment by a health care provider for a condition that either prevents the employee from performing the functions of the employee's job, or prevents the qualified family member from participating in school or other daily activities.

Subject to certain conditions, the continuing treatment requirement may be met by a period of incapacity of more than 3 consecutive calendar days combined with at least two visits to a health care provider or one visit and a regimen of continuing treatment, or incapacity due to pregnancy, or incapacity due to a chronic condition. Other conditions may meet the definition of continuing treatment.

Use of Leave

An employee does not need to use this leave entitlement in one block. Leave can be taken intermittently or on a reduced leave schedule when medically necessary. Employees must make reasonable efforts to schedule leave for planned medical treatment so as not to unduly disrupt the employer's operations. Leave due to qualifying exigencies may also be taken on an intermittent basis.

Substitution of Paid Leave for Unpaid Leave

Employees may choose or employers may require use of accrued paid leave while taking FMLA leave. In order to use paid leave for FMLA leave, employees must comply with the employer's normal paid leave policies.

Employee Responsibilities

Employees must provide 30 days advance notice of the need to take FMLA leave when the need is foreseeable. When 30 days notice is not possible, the employee must provide notice as soon as practicable and generally must comply with an employer's normal call-in procedures.

Employees must provide sufficient information for the employer to determine if the leave may qualify for FMLA protection and the anticipated timing and duration of the leave. Sufficient information may include that the employee is unable to perform job functions, the family member is unable to perform daily activities, the need for hospitalization or continuing treatment by a health care provider, or circumstances supporting the need for military family leave. Employees also must inform the employer if the requested leave is for a reason for which FMLA leave was previously taken or certified. Employees also may be required to provide a certification and periodic recertification supporting the need for leave.

Employer Responsibilities

Covered employers must inform employees requesting leave whether they are eligible under FMLA. If they are, the notice must specify any additional information required as well as the employees' rights and responsibilities. If they are not eligible, the employer must provide a reason for the ineligibility.

Covered employers must inform employees if leave will be designated as FMLA-protected and the amount of leave counted against the employee's leave entitlement. If the employer determines that the leave is not FMLA-protected, the employer must notify the employee.

Unlawful Acts by Employers

FMLA makes it unlawful for any employer to:

- Interfere with, restrain, or deny the exercise of any right provided under FMLA;
- Discharge or discriminate against any person for opposing any practice made unlawful by FMLA or for involvement in any proceeding under or relating to FMLA.

Enforcement

An employee may file a complaint with the U.S. Department of Labor or may bring a private lawsuit against an employer.

FMLA does not affect any Federal or State law prohibiting discrimination, or supersede any State or local law or collective bargaining agreement which provides greater family or medical leave rights.

FMLA section 109 (29 U.S.C. § 2619) requires FMLA covered employers to post the text of this notice. Regulations 29 C.F.R. § 825.300(a) may require additional disclosures.



For additional information:
1-866-4US-WAGE (1-866-487-9243) TTY: 1-877-889-5627
WWW.WAGEHOUR.DOL.GOV



EMPLOYEE ASSISTANCE PROGRAM - EAP

When life's a little much, your EAP has you covered.

Life can be challenging. When your responsibilities start to feel overwhelming and showing up each day seems difficult, it's important to reach out for help. You can lean on your confidential Employee Assistance Program (EAP) for support.

Real support for real life.

A no-cost-to-you benefit from your workplace, your EAP can help you or anyone in your household:

- Receive support when you don't feel like yourself
- Get help with responsibilities that are distracting or stressful
- Improve personal relationships
- Receive care after a traumatic event or diagnosis
- Make healthy lifestyle choices
- Improve and inspire daily life
- Be more present and productive at work
- Grow personal and career skills

We're always here for you.

Life happens regardless of day or time. We are available 24 hours a day, 365 days a year. Whenever you need to reach out, we are here for you.

Your EAP can help you:

Reduce stress | Cope after crisis | Focus at work
Lead others | Live a healthier life | Be resilient
Support and improve relationships

How to reach your EAP



Support Line
877-300-9103



Online
eap.ndbh.com



Mobile app
Search for
New Directions
EAP

**EAP services are 100%
confidential and no-cost to you.**

eap.ndbh.com
Code: ARBenefits
877-300-9103

“EAP has been beneficial in so many ways I don’t know how I would have gotten through without it.”

Download our app.

Search for **New Directions EAP** in your app store.



Whatever life throws your way, we’re here to help.

Stress, relationships, work and money. These are the most common reasons people reach out to EAP every year. No matter what issues you’re facing, EAP is the perfect first step for you or your household members.

Counseling

Depending on your situation, your preference for help may change. That’s why we offer several different ways for you to get what you need. Counseling is available in a variety of ways:

- Face-to-face
- Over the phone
- Online
- In-the-moment

Work/Life

Work/Life services can help you tackle your to-do list with specialists who can locate providers, get referrals and find resources for almost anything you and your household needs. You have free access to:

- Personalized consultation with a highly-trained specialist over the phone or through online chat
- Referrals to local providers and resources
- Tip sheets, checklists and other helpful tools

Work/Life topics may include family and caregiving, education, legal and financial, career and work, and health and wellness.

Coaching

Life coaching services are designed to promote self-awareness, clarify visions, values, intentions and goals. This service builds on strengths that you already have to help you set and achieve your goals. With coaching you can:

- Schedule telephonic sessions with one of our coaches
- Work with your coach to establish and meet goals
- Identify resources to keep you on track

Coaching topics may include managing stress, work/life balance, time management, personal challenges, setting and organizing priorities.

Online Services

Our comprehensive website, as well as our New Directions EAP mobile app, make it easy to access information regarding EAP benefits and requesting services. The website and app offer:

- Referrals via online intake
- Substance use resources
- Mental health toolkits
- Resource Library includes webinars, calculators, videos, articles and much more.
- Monthly live webinars and other training resources

Take your first step and call today.

eap.ndbh.com
Code: ARBenefits
877-300-9103