

# MADERA UNIFIED SCHOOL DISTRICT

## Human Resources Department

### PARENTAL (CHILD-BONDING) LEAVE REQUEST

Pursuant to the Federal Family Medical Leave Act (FMLA), the California Family Rights Act (CFRA), EC 44977.5, 45196.1, an employee may take parental leave for the birth of a child, or the placement of a child with the employee for adoption or foster care within the first 12 months after birth or placement of the child. Parental Leave may be taken continuously or on an intermittent basis in no less than two (2) week increments. Employer must be notified at least 2 weeks prior to taking leave.

☐

CERTIFICATED

☐

CLASSIFIED

NAME: \_\_\_\_\_

SSN #: XXX-XX-\_\_\_\_\_

JOB TITLE: \_\_\_\_\_

WORK SITE: \_\_\_\_\_

DATES OF ABSENCE: \_\_\_\_\_ - \_\_\_\_\_

TOTAL # WEEKS: \_\_\_\_\_

Please check one of the following:

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I request to take Parental Leave after the birth of my child born on \_\_\_\_\_.

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I request to take Parental Leave following the adoption or foster care placement of my child, which will take place on \_\_\_\_\_.

#### Employee acknowledgment

- I understand my leave is to bond with my new child.
- I understand I must have prior approval before taking parental leave.
- I understand I am required to return to duty at the end of my leave unless I have requested an approved extension.
- I understand that failure to return to work at the end of my leave period as indicated above will result in an unpaid leave of absence and may be grounds for discipline.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisor's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Chief Human Resources Officer or Designee

\_\_\_\_\_  
Date