Employer's Family / Medical Leave Request Checklist

If an employee requests leave, or the University is “on notice” it is the University’s obligation to secure any rights/protections the employee may be eligible for under the FMLA by providing:

☐ The Employee’s Family/Medical Leave Request Checklist, and
☐ Certification of Health Care Provider that corresponds to the nature of the leave. If the leave is for his/her own serious health condition – also provide a copy of the employee’s job description for the physician’s reference in determining ability to perform the job & any medically required accommodation, and
☐ A copy of the employee’s position description and
☐ The “Your Rights Under the FMLA” document.
☐ Within five business days of the employee’s implied need for leave, provide the employee a completed Notice of Eligibility and Rights & Responsibilities (WH-381 form)

Fifteen calendar days are provided for the employee to return the completed Certification form.

In response to the completed Certification form (or other medical/legal documentation):

☐ Within five business days, provide the employee a completed Designation Notice (WH-382) if the employee is FMLA-eligible
☐ A response. If approved, provide the employee written confirmation of the following (reference sample leave approval letter):
   a. The dates of the approved leave (or what additional information is needed)
   b. Requirements during the leave, eg:
      i. The method and frequency that the employee must be in contact with UMass,
      ii. Additional medical information or recertification which will be required during the leave,
   c. The date by which the employee must submit a:
      i. Medical release to return and perform the essential functions of his/her job (unless this is a parental leave or a leave to care for a family member who is suffering from a serious health condition), or
      ii. A request for extended leave,
      iii. A request for accommodation (if necessary) in order for you to have time to review/respond to the request before the employee returns to work.
☐ Submit time & attendance for the employee as agreed upon (or in keeping with instructions provided by Human Resources if Sick Leave Bank benefits have been approved)
Submit Personnel Action Form to Human Resources (exception: PAFs for Workers’ Compensation leave is generated centrally)

Write to the employee during his/her leave if he/she is not meeting the leave requirements.

If leave is due to employee’s own medical condition, obtain a medical release to return the employee to perform the essential functions of his/her position (and secure any medically required accommodations) before allowing him/her to return and perform work.

When the leave is complete, send to Human Resources copies of all completed FMLA documents and written communications related to the leave.