# UPG Paid Parental Leave Request Form

This request should be made at least thirty (30) Days in advance of the date on which you wish to start Paid Parental Leave when practical, and following a written request to your supervisor. If your spouse is also an eligible University employee, they will need to complete a separate Paid Parental Leave Request Form as per UVA Policy. Further information on UPG Paid Parental Leave and related policies, including the terms and conditions, can be found at [http://upgpolicy/](http://upgpolicy/).

## PART I: To be completed by EMPLOYEE

<table>
<thead>
<tr>
<th>Request Type:</th>
<th>☐ Initial Request</th>
<th>☐ Revised Previous Request</th>
</tr>
</thead>
<tbody>
<tr>
<td>Type of Leave Requested:</td>
<td>☐ Birth</td>
<td>☐ Adoption</td>
</tr>
<tr>
<td></td>
<td>☐ Custody/Placement</td>
<td>☐ Other Please Explain</td>
</tr>
</tbody>
</table>

**Employee Name:** ____________________________  **University ID #:** ____________________________

**Employee Type:** ☐ UPG Admin  ☐ UPG Provider  **Job Title:** ____________________________

**UPG/SOM Department / Division:** ____________________________

**Work Phone:** ____________________________  **Other Phone:** ____________________________  **Email:** ____________________________

**Supervisor Name:** ____________________________  **Supervisor UPG Phone:** ____________________________

**Supervisor Email:** ____________________________

**Time Off Request**

| Anticipated Begin Date: | ______/_____/______ | End Date: | ______/_____/______ |

**Number of Weeks (Up to 8):** ____________________________

I am requesting Continuous Paid Parental Leave and have informed my supervisor accordingly.

**Employee Initials:** _________  **Date:** __________

**Documentation** must be submitted within thirty (30) calendar days of Birth, Adoption or Placement date.

- **For a Birth,** documentation proving eligibility for Paid Parental Leave (Birth Certificate or Hospital Birth Confirmation) required.
- **For an Adoption,** documentation from a Court Agency and/or Attorney (Custody/Adoption Order) required.
- **For Foster Care Placement,** government-issued or legal document dated and signed by a court official indicating the date that the child was placed in the home required.

**Employee Affirmation**

I affirm that the information provided on this form is complete and accurate and has been reviewed with my manager. I acknowledge that I have read and understand the UPG Paid Parental Leave information available to me on the PolicyTech website or by contacting the UPG Benefit Specialist and that I will provide the required documentation and other information as may be requested.

**Employee Signature:** ____________________________________  **Date:** ____________________________
# UPG Paid Parental Leave Request Form

**PART II: To be completed by UPG HUMAN RESOURCES**

<table>
<thead>
<tr>
<th>Date Request Received:</th>
<th>University ID:</th>
</tr>
</thead>
<tbody>
<tr>
<td>12/31/2023</td>
<td>123456</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Employee Name:</th>
<th>University ID:</th>
</tr>
</thead>
<tbody>
<tr>
<td>John Doe</td>
<td>123456</td>
</tr>
</tbody>
</table>

### Eligibility

- ☐ Eligible for Family and Medical Leave Act (FMLA) by being employed for twelve (12) consecutive months and have worked 1250 hours during the twelve (12) months immediately preceding the birth, adoption or placement of a child.
- ☐ Employed in a benefits eligible position upon the birth, adoption or placement of a child under the age of eighteen (18).
- ☐ Employee is the biological parent, adoptive parent or foster parent.

### Pending Approval

- ☐ Leave is approved pending receipt of documentation. Date: 12/31/2023

### Denial

- ☐ Leave is denied – Not eligible for FMLA. Employee has not been employed for twelve (12) consecutive months and has not worked 1250 hours during the twelve (12) months immediately preceding the birth, adoption or placement of a child.
- ☐ Leave is denied – Employee not employed in a benefits eligible position upon the birth, adoption or placement of a child under the age of eighteen (18).
- ☐ Leave is denied – Employee has exhausted all available Paid Parental Leave.

    Dates of Paid Parental Leave: 12/31/2023 to 12/31/2023

### Secondary Action

- ☐ Leave is approved as requested. Date: 12/31/2023
- ☐ Supporting Documentation received. Date: 12/31/2023

    Supporting Documentation:
    - ☐ Birth Certificate or Hospital Birth Confirmation
    - ☐ Custody/Adoption Order
    - ☐ Foster Care Agreement/Court Order
    - ☐ Other (Specify):
    - ☐ Leave is denied – Employee did not provide Supporting Documentation. Date: 12/31/2023

### Human Resources Follow – Up:

- ☐ Date of Birth or Adoption: 12/31/2023
- ☐ Date of Custody or Placement: 12/31/2023
- ☐ Is the employee eligible for FMLA Leave? ☐ Yes ☐ No If yes, Begin Date: 12/31/2023 to End Date: 12/31/2023
- ☐ Employee has entered PPL request in Workday. ☐ Yes ☐ No If yes, Begin Date: 12/31/2023 to End Date: 12/31/2023
- ☐ Employee’s manager has received notification either by HR or Workday the disposition of the PPL request. ☐ Yes ☐ No

**Printed Name (UPG Human Resources Representative):**

Signature: ___________________________ Date: __/__/____