

Leave of Absence Request Form

Please print legibly. Request form must be completed if an employee will be away from work for **more than 3 days**. Email (Leave@tandemhr.com) or fax (630.468.9112) this completed form.

Employee Identification	Employee Name:	Original Hire Date:	Date Completed:
	Employee Phone:	Employee Email:	Employer/Company:
	Manager Name:	Manager Phone:	Manager Email:
Leave Dates	Last Day Worked:	Anticipated Leave Start Date:	Anticipated Return to Work Date:
Reason for Requested Leave	<p>Personal <i>Check one:</i> Medical Non-Medical</p> <p>Maternity/Pregnancy related Birth of child/bonding – Date of (or anticipated date of) birth: Adoption/foster care (attach copy of placement paperwork) Care of covered family member who has qualifying serious health condition <i>Check one:</i> Spouse Domestic partner Parent Child</p> <p>Military leave <i>Check one:</i> Active duty/training (<i>Attach a copy of official military orders.</i>) Qualifying exigency Relationship to employee: Details:</p> <p>Other:</p>		
Schedule for Requested Leave	<p>Continuous Leave</p> <p>Intermittent or Reduced Schedule Leave <i>Intermittent or reduced leave may be approved where required by state or federal law, where permitted by company policy, or where medically necessary and the need for such leave is best accommodated through scheduling.</i></p>		
Other Details	<p>It is the employee's responsibility to pay their regularly scheduled benefit premiums while on a continuous leave of absence. Please contact Tandem HR's benefits department for more information at 630.928.0510 or benefits@TandemHR.com.</p>		
For Internal Use Only	<p style="text-align: center;"><u>FMLA Eligibility</u></p> <p>12 months employment Company Leave Details: 1,250 hours worked Amount of FMLA used in the past 12 months</p> <p>Notes:</p>		

Leave of Absence Process

Leave Types

Family Medical Leave Act (FMLA): Eligible employees must have worked for 12 consecutive months *and* worked 1250 hours in the preceding year.

Leave of Absence (LOA): This leave is for employees not eligible for FMLA. This request will need approval from your employer.

STEP 1

Report Leave Request

Report a need for a leave of absence to your direct leader as soon as possible. Continuous leave should be reported no more than 30 days prior to the first day out, except for maternity leave.

STEP 2

Leave Request

To request a leave of absence you must complete the Leave of Absence Request Form and send to Tandem HR. Tandem HR's Leave Management Team will email the necessary paperwork to the personal email address on file within 5 business days. If there is not a personal email address provided in PeopleHub, it will be sent to the work email address on file. **Be sure to check "Junk or Spam" email folders.*

STEP 3

Forms

Once you receive the email with paperwork from Tandem HR's Leave Management Team, please read through everything for instructions.

FMLA or LOA medical certification forms need to be completed by the physician and sent directly to Tandem HR for review and approval. Please allow 5 business days to be reviewed and processed with a decision.

Short Term Disability applications need to be completed by the employee and physician. These will need to be sent directly to the disability insurance carrier for approval and short-term disability payment process. The employer section of this application is completed by Tandem HR during the leave request and sent directly to the carrier.