

Public Health Emergency Leave Request Review Checklist

- _____ 1. Click the hyperlink in the notification email.
- _____ 2. Follow your normal FMLA processes at your institutions to determine eligibility, counsel employee, review benefits, leave balances, etc.
- _____ 3. Verify that the form has been filled out accurately.
 - If not, deny the request for the employee to correct and resubmit or assist employee in completing the form.
- _____ 4. Verify that the employee has been employed for the past 30 days.
 - If not employed for the past 30 days, deny the request.
- _____ 5. Verify that the employee has FMLA leave available for the current year.
 - If not eligible for FMLA leave, deny the request.
- _____ 6. Review the form to see if the employee wants to take the first 2 weeks with paid leave.
 - If yes, instruct the employee to enter their leave request.
- _____ 7. If the employee would like to use accrued leave to supplement the 2/3 salary, enter the hours to use for each leave type in the leave type description on the form.
- _____ 8. Enter the following information in the More Information field on the form:
 - Priority order for using leave identified in step 5?
 - Is leave continuous or intermittent?
- _____ 9. Approve or deny the form as appropriate.

Additional Considerations:

- All fields of a submitted form can be modified by HR administrators on behalf of an employee.
- If an employee is employed at multiple institutions, direct the employee to fill out paper forms for additional requests.
- If a request is denied the employee can update the form and resubmit.
- If the employee has furlough scheduled during their FMLA, these days need to be rescheduled.