

Leave Sharing Request Form

Name of Employee Requesting Leaving Sharing: _____ Date _____

Criteria to be eligible for leave sharing:

Check which of the following applies:

- (a) Suffers from, or has a relative or household member suffering from, an illness, injury, impairment or physical or mental condition which is of an extraordinary or severe nature;
- (b) Has been called to service in the uniformed services;
- (c) A state of emergency has been declared anywhere within the United States by the federal or any state government and the employee has the needed skills to assist in responding to the emergency or its aftermath and volunteers their services to either a governmental agency or to a nonprofit organization engaged in humanitarian relief in the devastated area, and the governmental agency or nonprofit organization accepts the employee's offer of volunteer services;
- (d) Is a victim of domestic violence, sexual assault or stalking as defined in RCW [41.04.655](#);
- (e) Is a current member of the uniformed services or is a veteran as defined under RCW [41.04.005](#), and is attending medical appointments or treatments for a service connected injury or disability;
- (f) Is a spouse of a current member of the uniformed services or a veteran as defined under RCW [41.04.005](#), who is attending medical appointments or treatments for a service connected injury or disability and requires assistance while attending appointments or treatments;
- (g) Needs the time for parental leave as defined in WAC [357-31-395](#)(3); or
- (h) Is sick or temporarily disabled because of a pregnancy disability as defined in WAC [357-31-395](#)(4).

(2) The condition(s) listed in subsection (1)(a) through (d) of this section is likely to cause, the employee to go on leave without pay status or terminate state employment.

(3) The employee's absence and the use of shared leave are justified.

(4) The employee has depleted or will shortly deplete leave in accordance with WAC [357-31-435](#).

(5) The employee has abided by employer rules regarding:

- (a) Sick leave use if the employee qualifies under subsection (1)(a), (d), (g), or (h) of this section; or

(b) Military leave if the employee qualifies under subsection (1)(b) of this section.

What definitions apply to shared leave?

The following definitions apply to shared leave as defined in RCW [41.04.655](#):

(1) "Employee" means any employee of the state, including employees of school districts and educational service districts, who are entitled to accrue sick leave or vacation leave and for whom accurate leave records are maintained.

(2) "Employee's relative" normally must be limited to the employee's spouse, registered domestic partner, child, grandchild, sibling, grandparent, or parent.

(3) "Parental leave" means leave to bond and care for a newborn child after birth or to bond and care for a child after placement for adoption or foster care.

(4) "Pregnancy disability" means a pregnancy-related medical condition or miscarriage.

(5) "Service in the uniformed services" means the performance of duty on a voluntary or involuntary basis in a uniformed service under competent authority and includes active duty, active duty for training, initial active duty for training, inactive duty training, full-time national guard duty including state-ordered active duty and a period for which a person is absent from a position of employment for the purpose of an examination to determine the fitness of the person to perform any such duty.

(6) "Severe" or "extraordinary" condition is defined as serious, extreme or life threatening.

(7) "Uniformed services" means the armed forces, the army national guard, and the air national guard of any state, territory, commonwealth, possession, or district when engaged in active duty for training, inactive duty training, full-time national guard duty, or state active duty, the commissioned corps of the public health service, the coast guard and any other category of persons designated by the President of the United States in time of war or national emergency.

How much shared leave may an employee receive?

(1) The employer determines the amount of leave, if any, which an employee may receive under these rules. However, an employee must not receive more than five hundred twenty-two days of shared leave during total state employment. An employer may authorize leave in excess of five hundred twenty-two days in extraordinary circumstances for an employee qualifying for shared leave because they are suffering from an illness, injury, impairment, or physical or mental condition which is of an extraordinary or severe nature. A nonpermanent employee who is eligible to use accrued leave or personal holiday may not use shared leave beyond the expected end date of the appointment. Leave used under the sick leave pool program, as described in WAC [357-31-570](#), is included in the five hundred twenty-two day limit.

(2) An employee receiving shared leave for parental leave in accordance with WAC [357-31-395](#) may receive up to sixteen weeks immediately after the birth or placement unless the birth parent suffers from a pregnancy disability. When a birth parent suffers from a pregnancy

disability the period of sixteen weeks for parental leave begins immediately after the pregnancy disability has ended provided the parental leave is used within the first year of the child's life.

(3) An employee receiving industrial insurance wage replacement benefits may receive up to twenty-five percent of their base salary from the receipt of shared leave.

(4) Employers are encouraged to consider other methods of accommodating the employee's needs such as modified duty, modified hours, flex-time, or special assignments in place of shared leave.

Can shared leave be used intermittently or on nonconsecutive days?

Yes, as the leave has not been returned under WAC [357-31-445](#).

What documentation is an employee seeking shared leave required to submit?

An employee is required to submit the following documentation before the employer approves or disapproves the employee's request for shared leave:

(1) For employees seeking shared leave under WAC [357-31-390](#) (1)(a), the employer requires the employee to submit a medical certificate from a licensed physician or health care practitioner verifying the severe or extraordinary nature and expected duration of the condition.

(2) For employees seeking shared leave under WAC [357-31-390](#) (1)(b), the employer requires the employee to submit a copy of the military orders verifying the employee's required.

(3) For employees seeking shared leave under WAC [357-31-390](#) (1)(c), proof of acceptance of an employee's offer to volunteer for either a governmental agency or a nonprofit organization during a declared state of emergency.

(4) For employees seeking shared leave under WAC [357-31-390](#) (1)(d), the employer requires that the request be supported by documentation. An employee may satisfy the verification requirement by providing the employer with one or more of the following:

(a) A police report indicating that the employee was a victim of domestic violence, sexual assault or stalking;

(b) A court order protecting or separating the employee from the perpetrator of the act of domestic violence, sexual assault or stalking;

(c) Evidence from the court or prosecuting attorney that the employee appeared or is scheduled to appear in court in connection with an incident of domestic violence, sexual assault or stalking;

(d) An employee's written statement that the employee is a victim of domestic violence, sexual assault or stalking; or

(e) Documentation that the employee is a victim of domestic violence, sexual assault or stalking, from any of the following persons from whom the employee or employee's family member sought assistance in addressing the domestic violence, sexual assault or stalking: An

advocate for victims of domestic violence, sexual assault or stalking; an attorney; a member of the clergy; or a medical or other professional.

(5) Employees seeking shared leave under WAC [357-31-390](#) (1)(e) or (f), the employee must provide documentation in accordance with WAC [357-31-805](#).

(6) Employees seeking shared leave under WAC [357-31-390](#) (1)(g), the employer requires verification of the birth or adoption of the child or proof of a current foster parent license or a court document for foster care or placement.

(7) Employees seeking shared leave under WAC [357-31-390](#) (1)(h), the employer requires a medical certification from a licensed physician or health care practitioner verifying that the employee has a pregnancy disability.

(8) For employees seeking shared leave under WAC [357-31-390](#)(6), the employer requires written verification submitted electronically, confirming the circumstances of isolation or quarantine, that the employee is high risk, that no other suitable person is available to provide child care, or other circumstances listed in WAC [357-31-390](#) (6)(a)(i) through (v). This may include a signed affidavit from the employee, or any other information requested by the employer.

What happens to leave that was donated under the state leave sharing program and was not used by the recipient?

(1) Any shared leave not used by the recipient during each incident/occurrence as determined by the employer must be returned to the donor(s).

(a) If shared leave has been granted for an employee that suffers from an illness, injury, impairment, or physical mental condition which is of an extraordinary or severe nature unused shared leave may not be returned to the donor until one of the following occurs:

(i) The employer receives a statement from the affected employee's licensed physician or health care practitioner verifying that the illness or injury is resolved; or

(ii) The employee is released by their licensed physician or health care practitioner to return to their normal schedule; has not received additional medical treatment for his or her current condition or any other qualifying condition for at least six months; and the employee's licensed physician or health care practitioner has declined, in writing, the employee's request for a statement indicating the employee's condition has been resolved.

(b) The remaining shared leave must be returned to the donors and reinstated to the respective donors' appropriate leave balances based on each employee's current salary rate at the time of the reversion. The shared leave returned must be returned in accordance with office of financial management policies.

(2) Unused shared leave may not be cashed out by a recipient.

Documentation for qualified leave must be included when turning in this form.

Employee wishes for other to know they are seeking shared leave _____ or remain anonymous _____. Please initial on the appropriate line.

Signature of employee requesting leave _____

Physician's Statement

Patient's Name _____ Relationship to Employee _____

Describe the patient's illness, injury, impairment, or physical or mental condition which is of an extraordinary or severe nature: _____

Expected Return to Work Date or End of Condition, if known _____

I attest this medical condition is of an extraordinary and/or severe nature.

Physician's Signature

Date

Superintendent Signature _____ Date _____

Leave Approved _____

Leave **NOT** Approved _____

Once approved, the district will send out an email to all employees notifying them that a staff member has qualified for leave sharing and those employees who qualify to donate their leave can notify the district of the number of days they wish to donate.