

Kaneland Community Unit School District No. 302 Leave Inquiry Form

Kaneland Community Unit School District No. 302 has notice obligations under the Family and Medical Leave Act (FMLA 29 U.S.C. §2601 et seq.). An employee who is taking any type of paid or unpaid leave pursuant to District Policy (5.180, 5.185 and 5.250) must complete and **return the following form to the Business Office.** We will send you an “Employer Response to Employee Request for FMLA Leave”.

Employee’s Name: _____

Social Security Number: _____

Position: _____

Start Date of Leave: _____

Expected Date of Return to Work: _____

Reason for Leave (Please Explain Briefly): _____

Category of Leave (Check One):

_____ Birth of and first-year care of employee’s son or daughter

_____ Adoption or foster placement of employee’s child

_____ Serious health condition of an employee’s spouse, parent, or child

_____ Employee’s own serious health condition which makes the employee unable to perform the functions of his or her job

_____ Other (Check this category where none of the above categories apply)

Signature of Employee: _____

Date: _____

Received by: _____, Assistant Superintendent for Human Resources

Date Received: _____

Encl: WH Publication 1420; Board Policy 5.185; Board Policy 5.250