



Request for Paid Parental Leave (PPL)

Employee Name:		Date of Request:	
Reason for PPL:		PPL Dates: From:	To:
Do you wish to use PPL intermittently? If yes, please provide details regarding how you wish to use the leave:			
The following documents may be used to support your request for Paid Parental Leave but are not required to be approved for Paid Parental Leave.			
Qualifying Event	Acceptable Documentation		
Adoption	<ul style="list-style-type: none"> Adoption Order 		
Birth	<ul style="list-style-type: none"> Birth Certificate or Report of Birth Certified DNA Results Custody Order 		
Foster Placement	<ul style="list-style-type: none"> Foster Care Placement Agreement Custody Order 		
Other Legal Placement	<ul style="list-style-type: none"> Certificate of Parental Responsibility Custody Order 		
CERTIFICATION			
I certify that I meet the following requirements under the Paid Parental Leave Guidelines: <i>I have or will become a parent by childbirth, adoption, foster, other legal placement*, or I am or will stand in loco parentis.</i>			
<i>*(Note: <u>Other legal placement does not include parental custody cases or legal assignments as a Guardian ad Litem (GAL).</u></i>			
I acknowledge the information provided above is accurate and I understand that any falsification of information may lead to disciplinary action up to and including dismissal.			
Employee Signature:		Date:	

HR USE ONLY:

No

FML Eligible	Yes No	FML Period:	From:		To:
PPL Status:	Yes No	If Denied Explain:			
Intermittent Use Approved	Yes No	PPL Effective Date:			
Delay use due to Public Safety	Yes No				
Reason for Public Safety Delay					