Instructions for Requesting a Leave of Absence/FMLA

Block Leave (i.e. out of work for a specific period of time related to a serious health condition)
Employee must submit at least 30 days in advance when leave is foreseeable:
  o Medical Certificate (P33A for self or P33B for caregiver) completed by the treating medical provider
    • Important: For a Block Leave, the medical certificate must include the start date of the leave, as well as an estimated return to work date.
  o Employee Request (Form HR1)
  o Intent to Return to Work (Form HR3)
  o Statement of Qualifying Relationship (Form HR4) – only needed for caregiver leave

Intermittent Leave or Reduced Schedule Leave (i.e. out of work sporadically or on a reduced schedule for the same serious health condition)
Employee must submit at least 30 days in advance when leave is foreseeable:
  o Medical Certificate (P33A for self or P33B for caregiver) completed by the treating medical provider
    • Important: For an Intermittent Leave, the medical certificate must include an estimated duration and frequency of your absences (example: “up to 4 hours at a time, approximately 1 to 2 times per week”). It must also include the start and end date of the leave.
    • Important: For a Reduced Schedule Leave, the medical certificate must include the exact amount of hours you can work per day, as well as the length of time the reduced schedule is needed.
  o Employee Request (Form HR1)
  o Statement of Qualifying Relationship (Form HR4) – only needed for caregiver leave

The following site contains all forms as well as the Statewide FMLA Policy:
https://health.uconn.edu/human-resources/services/benefits/leaves-ofabsence/

All completed forms can be submitted via fax to 860.679.4660 or via e-mail to hr-employeeresource@uchc.edu.

Please contact the HR Employee Resource Center at hr-employeeresource@uchc.edu or 860.679.2426 with any specific questions related to the submission of required forms.