LOS RIOS COMMUNITY COLLEGE DISTRICT REQUEST FOR LEAVE OF ABSENCE ARC CRC DO Job Title: ______ П **EDC** Empl ID: _____ Department: ____ **EWC** FLC Long-Term Health ☐ Long-Term Military ☐ Full-Time Educational ☐ Part-Time Educational ☐ Personal Type of Leave*: Long-Term Health □ FΜ Peace Corps SCC *It is the responsibility of the Administrative Officer to make sure the requestor qualifies for the requested leave. NOTE: Leaves pertaining to pregnancy / childbirth are reported on another form. The last day I intend to report to work is ____ Use of Sick Leave: Give dates sick leave will be used, if applicable. ** From ______ To _____ ☐ <u>I am enclosing a verification for this absence signed by my attending physician.</u> **Use of Earned Vacation**: Give dates of vacation, if applicable.*** _____ To ____ Approved by supervisor: ____ **Unpaid Leave of Absence**: Give dates of unpaid leave. *** ☐ I am reducing my workload in order to teach part-time with Los Rios. The class(es) I will be teaching is/are at: List location(s), Department AND College, for class(es) being taught. Please reference Administrative Regulation R-6326, 7.1.3. Final warrant will be distributed in the usual manner unless employee requests optional distribution through the Payroll Department (568-3026). 11 months 9 months \square 12 months \square 10 months Work Schedule: Employee: By signing below, I agree that I have read the reverse side of this form. I understand and accept the effects this leave will have on my Los Rios benefits and that I must give two weeks notice of my return to work to the administrative office. Signed _____Employee Date _____ Date _____ Administrative Officer ** Sick Leave must be used prior to beginning a long-term health leave. *** Vacation must be used prior to a long-term health leave and/or personal leave (except in those cases where an employee is reducing their hours to teach part-time). **District Employee Benefits Office Use Only** 1. Does this employee have sufficient leave to cover absence stated above? Yes \square No \square

2. If no, last day of paid status is ______.

Verified by ____

District Human Resources Office Use Only

Dates/Type/% of unpaid LOA: ______ Record #: _____

Range/Step (+SD/Lng): _______ %: _____ Date Processed: ______

______ FTE: ______ Initials: _____

NOTE: Must be approved by the work location administrative officer and forwarded to District Human Resources.

Distribution: Original – Human Resources/Employee Benefits Copy – VP Administration Copy – Employee :forms\request for leave of absence (P-112)

UNPAID LEAVE OF ABSENCE – EFFECT ON BENEFITS

Effect of Unpaid Leave on Benefits

- If the period of unpaid leave is for less than one full calendar month (e.g. May 1-15, 2018):
 - o Benefits will remain in effect. If the employee's pay is insufficient to cover the employee's cost of benefits, the missed deductions will be adjusted on the next payroll after the employee returns.
 - o SEIU Members: The District contribution for benefits will be prorated based on the percent of full time for each month affected unless the employee's time off is covered under Five Month Law or State or Federal leaves such as FMLA/CFRA.
 - o Accrual of sick and vacation (if applicable) will be prorated based on percent of full-time for each month affected.
- If the period of unpaid leave is for one full calendar month or more (e.g. May 1-31, 2018 or after):
 - o For Family Medical Leave Act / California Family Rights Act (FMLA / CFRA) covered absences, benefits will remain in effect so long as the employee submits payment for the employee's cost of those benefits to the Los Rios Benefits Department by the 25th of each month for coverage the following month. Coverage will cease the first day of the following month if payment is not received on time.
 - o For non-FMLA/CFRA covered absences, benefits will cease the first day of the month of the unpaid leave.
 - Employees may continue health, dental, vision and the Employee Assistance Program (EAP) benefits in accordance with the Consolidated Omnibus Budget Reconciliation Act (COBRA) regulations by paying the full amount of the monthly premium plus a 2% administrative fee. BASIC pacific will mail COBRA paperwork to the employee's home address.
 - Other benefits (e.g. long term disability) will cease on the commencement date of the unpaid leave or the first of the following month, depending on plan design. Some benefits, such as life insurance, may be continued directly with Los Rios (similar to FMLA/CFRA benefit continuation above) depending on plan design. It is the employee's responsibility for making payment arrangements directly with companies, or to Los Rios CCD if appropriate, to avoid cancellation.
 - An employee off work due to a disabling condition remains eligible for long term disability (LTD) benefits provided the application and eligibility criteria are met. Employees with an active LTD claim are eligible for the District contribution toward medical insurance for the first 12 months of LTD, depending upon bargaining unit.
 - o Accrual of sick and vacation (if applicable) will cease until employee returns to work.
 - O Participation in the Medical Flexible Spending Account or Dependent Care Assistance Plan will cease on the commencement date of the unpaid leave. Upon return during the same plan year, the participant may elect to 1) reinstate the pre-leave payroll deduction, 2) reinstate the pre-leave payroll deduction and "catch-up" all missed contributions, or 3) not reinstate the contributions. This choice will affect the date range expenses qualify for reimbursement.

Effect of Cancellation of Medical, Dental & Vision Coverage

- For a short-term, unpaid leave of **less than five months** when the employee does not continue coverage through COBRA:
 - o the employee may **NOT re-enroll** into the medical or dental plan **until an open enrollment period** (unless a different qualifying event occurs after the employee's return to work such as loss of spouse's coverage.) Open enrollment takes place the month of April/May of each year and the coverage is effective July 1.
- For a long-term leave of **five months or more**, whether or not the employee continues coverage through COBRA:
 - o the employee <u>may re-enroll</u> into the medical and dental plan previously enrolled in <u>within 31 days</u> of returning to work and coverage will take effect the first of the month following the return to work date. Enrollment forms must be received in Employee Benefits within 31 days of returning to work; otherwise, the employee must wait until open enrollment to re-enroll.
- If dental insurance is cancelled for any length of time, the coverage percentage will start back at 70% upon re-enrollment.
- Due to the nature of the coverage, if vision insurance is cancelled for <u>any length of time</u>, employees will not be permitted to reenroll for a minimum of 24 months from the date coverage terminated.

It is the <u>EMPLOYEE'S RESPONSIBILITY TO CONTACT THE EMPLOYEE BENEFITS DEPARTMENT upon returning to work</u> to request appropriate forms to re-enroll in all insurance.

Contact Employee Benefits at 916-568-3070 or e-mail benefits@losrios.edu with any questions.

Additional Information

For special payroll deductions through Schools Financial Credit Union, the employee must contact Schools directly to make any necessary special arrangements. Contact the Payroll Department at 916-268-3025 for more information.

Any unpaid LOA may also affect the following: service credit for longevity salary increases, CalPERS/CalSTRS service credit, annual increments, and vacation accrual increases, if applicable. If you are interested in purchasing any unpaid leave of absence time, go to the CalPERS (www.calpers.ca.gov) or CalSTRS (www.calstrs.com) website for information on buybacks. Please refer to the appropriate Collective Bargaining Agreement, policies and regulation for details. Contact Employee Benefits for questions regarding vacation accrual. It may be possible to qualify for Unemployment Benefits while on a leave of absence. For information regarding the eligibility requirements for Unemployment Benefits, you can request a booklet from the Human Resources Department by calling 916-568-3112 or download at the following link: https://www.edd.ca.gov/pdf pub ctr/de2320.pdf

For more information on any of these additional effects, contact Human Resources at 916-568-3112 prior to taking a LOA.