



Funeral/Bereavement Leave Request

Date:	Department:	Division (if applicable)
Employee Name:	Employee Number:	Name of Relative:
Relationship of Relative to employee:	Dates Requested: Start: End:	Date of Death:

I am enrolled in the:

**LEGACY PLAN - FUNERAL LEAVE
(Policy 1409)**

An employee holding a budgeted position of 0.5 FTE (full time equivalent) or greater is eligible for paid funeral leave upon date of hire. Approved paid funeral leave absences are based on regular work schedules.

Type of leave (check appropriate box):

- Up to 5 days for spouse, child (minor / adult), mother, father, mother-in-law, father-in-law
- Up to 3 days for brother, sister, stepbrother, stepsister, stepmother, stepfather, stepchild (minor / adult)
- Up to 1 day for grandmother, grandfather, grandchild, aunt, uncle, daughter-in-law, son-in-law, brother-in-law, sister-in-law

**TOTAL BENEFIT PACKAGE - BEREAVEMENT
LEAVE
(Policy 1410)**

Paid bereavement leave is provided for employees who are in paid status. Time off must be taken within six months from date of death and documentation must be provided consistent with established guidelines.

Type of leave (check appropriate box)

- Up to 10 days for legally recognized spouse, child (minor / adult), stepchild (minor / adult), daughter-in-law, son-in-law
- Up to 5 days for brother, sister, mother, father, stepbrother, step sister, step mother, stepfather, brother-in-law, sister-in-law, mother-in-law, father-in-law

Signature of Employee:

Signature of Department Head/Designee:

Date Signed:

Submit to the Finance Department with a copy of appropriate documentation (i.e., obituary, funeral home/church service bulletin, death certificate, etc.).