

Echo School District 5R

Code: GCBDA/GDBDA-AR(6)
Revised/Reviewed: 1/22/13

Oregon Military Family Leave

Section 1: To be completed by the district:

The Oregon Military Family Leave Act provides that a district may require an employee seeking Oregon Military Family due to notification of impending call to active duty or deployment to submit a notification of the intention to take leave within five business days of receiving official notice.

District: _____

Superintendent or designee information: _____

Section 2: To be completed by the employee:

Complete the information below fully and completely. The Oregon Military Family Leave Act permits the district to require that you submit a timely, complete and sufficient notification for Oregon Military Family Leave Act due to notification of impending call to active duty or deployment.

Employee's name: _____
First Middle Last

Name of covered military member on active duty, called to active duty status or deployed:

First Middle Last

Relationship of covered military member to you: _____

Period of covered military member's impending call to active duty or deployment
: _____

Documentation to support a request for Oregon Military Family leave includes written documentation confirming a covered military member's active duty, call to active duty or deployment status. Please check one of the following:

- A copy of the covered military member's active duty orders is attached.
Other documentation from the military certifying that the covered military member is on active duty (or has been notified of an impending call to active duty) in support of a contingency operation is attached.
I have previously provided the district with sufficient written documentation confirming the covered military member's active duty or call to active duty status in support of a contingency operation.

Part A: Qualifying reason for leave

1. Describe the reason you are requesting Oregon Military Family Leave:

2. Documentation to support a request for Oregon Military Family leave includes any available written documentation which supports the need for leave; such documentation may include a copy of a meeting announcement for information briefings sponsored by the military, a document confirming an appointment with a counselor or school official, or a copy of a bill for services for the handling of legal or financial affairs. Available written documentation supporting this request for leave is attached. Yes No None available

Part B: Amount of leave needed

1. Approximate date active duty/deployment commenced _____

Probably duration: _____

2. Will you need to be absent from work for a single continuous period of time due to the active duty/deployment? Yes No

If yes, estimate the beginning and ending dates for the period of absence _____

3. Will you need to be absent from work periodically to address this active duty/deployment? Yes No

If yes, estimate the schedule of leave, including the dates of any scheduled meetings or appointments:

Part D: Employee Signature

I certify that the information I provided above is true and correct. For Oregon Military Family Leave purposes notice must be given by the employee within five business days of receiving official notice.

Signature of Employee

Date