

## Parental Leave

### Leave Eligibility

Academic Faculty, Administrative Professionals, Post-Doctoral Fellows, Veterinary and Clinical Psychology Interns with an appointment of at least half-time or greater are eligible for Parental Leave. An employee who is not in a paid employment status is not eligible (e.g. leave without pay, sabbatical, etc.) Program details are available in the [Academic Faculty & Administrative Professional Manual](#) or the [HR Manual](#).

### Leave Use

Parental Leave consists of **three (3) work weeks** of paid time off, in addition to the employee's accrued sick and annual leave (and any short term disability (STD) benefits to which the birth mother is entitled) to be used by a new parent to care for and bond with the child. Parental Leave, when combined with sick and annual leave and short term disability, is intended to ensure adequate time off and to provide, *in most circumstances*, compensation for at least 9 weeks of the birth mother's 12-week Family Medical Leave (FML) period. An adoptive parent, who is the primary caregiver is also eligible for 12 weeks of FML and a minimum of 9 weeks of paid leave, typically a combination of sick, annual and parental leave. A non-birth parent or an adoptive parent who is not the primary caregiver is eligible for 3 weeks of Parental Leave.

### Fringe Pool Reimbursement

Parental leave provides for the transfer of funds from the fringe pool to the employee's home department.

- **Birth mother** - up to 12 weeks of sick, annual and parental leave, plus a maximum of 10 days for the STD waiting period if there is not enough accumulated leave
- **Adoptive parent** – up to 9 weeks of sick, annual and parental leave used by the primary caregiver
- **Non-birth parent or adoptive parent who is not the primary caregiver** – up to 3 weeks of parental leave
- **Faculty** (semester teaching relief) – up to 9 (or 11) weeks of sick, annual and parental leave, plus an additional 5 (or 7) weeks of teaching relief for a non-tenure track birth mother

Employee Information		
Name:		Oracle ID:
Department:		Employee Type: <input type="checkbox"/> Faculty <input type="checkbox"/> Admin Pro <input type="checkbox"/> Post Doc
<b>Birth</b>	<input type="checkbox"/> Birth Mother <input type="checkbox"/> Non-Birth Parent	Date of Birth:
<b>Adoption</b>	<input type="checkbox"/> Primary Caregiver <input type="checkbox"/> Non-Primary Caregiver	Date of Placement of Adoption:
<b>STD</b>	<input type="checkbox"/> 10-Day Waiting Period (Special Leave)	Date All Leave is Exhausted:

Department Information	
Name:	Title:
Phone:	Designated for FML ( <i>Attach copies of FML Forms</i> ): <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> I confirm that all leave requested for reimbursement matches the hours entered in TimeClock Plus and a report is attached. <input type="checkbox"/> I understand if the report is not attached; the application will be considered incomplete and returned to the department. <input type="checkbox"/> I further understand that I must submit this form within 30 days of the completion of leave and forms submitted after the end of the fiscal year will not be processed.	
<ul style="list-style-type: none"> <li>• I confirm that the employee has requested the three (3) work weeks of Parental Leave and understands, it must be used in a contiguous block (not split into intermittent days off) and may be taken within the first year after delivery or placement for adoption.</li> <li>• I request the amount of total paid leave (up to twelve (12) work weeks – effective July 1, 2015) deemed eligible under the policy, be charged to the fringe benefits pool.</li> <li>• I have verified eligibility, however, Human Resources determines final eligibility under the terms of the policy.</li> </ul>	
Department Signature _____	Date _____



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## Parental Leave

Name: \_\_\_\_\_

Oracle ID: \_\_\_\_\_

**Include the total amount of leave used per month, as deemed eligible for reimbursement. Parental leave must be taken within the first year after delivery or placement for adoption and must be used in a contiguous block. All leave requested for reimbursement must match the hours entered in Oracle.**

a. Parental Leave Payable: \_\_\_\_\_ through \_\_\_\_\_ Hours  
(Start Date) (End Date)

b. Sick Leave Payable: \_\_\_\_\_ through \_\_\_\_\_ Hours  
(Start Date) (End Date)

\_\_\_\_\_ through \_\_\_\_\_ Hours  
(Start Date) (End Date)

c. Annual Leave Payable: \_\_\_\_\_ through \_\_\_\_\_ Hours  
(Start Date) (End Date)

\_\_\_\_\_ through \_\_\_\_\_ Hours  
(Start Date) (End Date)

(Non-tenure track Faculty)

d. Teaching Relief Support: \_\_\_\_\_ through \_\_\_\_\_ Hours  
(Start Date) (End Date)

**Total Leave Requested for Reimbursement: \_\_\_\_\_ Hours**  
*(Limited to 480 hours)*

### - HR Use Only -

Parental Leave: _____ Hours	FTE: <input type="checkbox"/> 9M <input type="checkbox"/> 12M <input type="checkbox"/> 9/12      Appt Type:
Sick Leave: _____ Hours	Date of Hire: _____      Salary: \$ _____
Annual Leave: _____ Hours	STD Start Date: _____      STD End Date: _____
Holiday: _____ Hours	<b>STD Waiting Period</b> ▪ Date of Disability: _____ ▪ Leave Exhausted: _____ Hours
STD Waiting Period: _____ Hours	
NTT Teaching Relief: _____ Hours	<b>Summer Session (Birth Mother)</b> ▪ Summer Session - 2 of last 3 Years: <input type="checkbox"/> Yes <input type="checkbox"/> No ▪ Average Duration of Term: _____ ▪ Eligible for Summer Term: <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Total Leave Reimbursed: _____ Hours</b>	

Parental Leave Spreadsheet / Payroll Notification: \_\_\_\_\_