Applying for Assault Leave

**EMPLOYEE**
- Notifies Principal/Supervisor of dates for Extended Leave of Absence
- Completes Form A
- Provides police report
- Provides medical documentation of physical injury
- Returns above completed forms to Leaves Office
- In person: 6400 Uptown Blvd NE Suite 210 East Tower
- By mail: HR-Leaves Office P. O. Box 25704 Albuquerque, NM 87125
- Secures Substitute, if required

**LEAVES OFFICE**
- Processes and mails approved/denied leave letter to employee’s home address
- Copy sent to Principal/Supervisor

**PRINCIPAL/SUPERVISOR**
**SECRETARY**
- Applies correct Leave of Absence Code for Payroll reporting
- Tracks FMLA usage

**EMPLOYEE**
- Returns Letter of Intent at the appropriate time
- Calls to schedule an afternoon reinstatement appointment
- Provides Medical Clearance to Leaves Office at end of leave to reinstate to active duty

**QUESTIONS**
- [Extended.Leaves@aps.edu](mailto:Extended.Leaves@aps.edu)
- (A-L) 889-4886
- (M-Z) 889-4865