



ALBUQUERQUE PUBLIC SCHOOLS
Human Resources—Extended Leaves Office
(A-L) 889-4886 Phone
(M-Z) 889-4865 Phone
884-0536 Fax

Extended Leave of Absence General Information

- While on an approved extended leave, an employee may not volunteer or perform any duties for APS or utilize APS property for personal use.
- Turn in all APS property prior to the leave.
- It is the employee's responsibility to advise the principal/supervisor of the expected dates of the extended leave of absence.
- It is a teacher's or educational assistant's responsibility to contact Substitute Services to obtain coverage for your position during the extended leave of absence.
- If you fail to reinstate on or before the end of your extended leave, your pay will be stopped. Pay may not be processed by the next pay date following your reinstatement. Once reinstated, pay will be adjusted over the remaining portion of the contract pay dates. No manual checks for retroactive pay will be processed.

PRIOR NOTIFICATION

Employees are to provide the Extended Leaves Office thirty (30) days notification prior to the commencement of the leave. This 30 day notification may be waived in case of a medical emergency situation. In a medical emergency situation, the employee must provide proper documentation as soon as feasibly possible. No third party photocopies or faxes accepted; medical documentation must be original or sent directly from the physician's office via fax or mail.

INSURANCE

Group insurance benefits (medical, dental, vision, LTD, flex spending, life) will continue provided the employee continues to make required premium payments to these plans. Failure to make such payments may result in the termination of benefits. The Response to Leave Request Letter will indicate the amount due and due date. If an employee chooses to drop medical benefits while on an extended leave of absence, benefits may be reinstated upon returning to work. Other benefits, such as retirement, 403(b), and 457(b) plans will be governed in accordance with the terms of each plan.

RETURNING TO WORK

1. Call to make an appointment with the Leaves Office: (A-L) 889-4886 or (M-Z) 889-4865
2. Bring applicable documentation for reinstating
3. Employee may return to work site only after reinstating, in person, with the Leaves Office

TYPE OF LEAVE	PAID OR UNPAID	ALL LEAVES REQUIRE: FORM A PLUS THE FOLLOWING DOCUMENTATION	REPORT TO THE LEAVES OFFICE IN PERSON TO REINSTATE PRIOR TO RETURNING TO THE WORK SITE
Advanced Study Leave	Unpaid	Acceptance letter from university, class schedule, statement page stating how study is related to subject matter being taught and how it is expected to enhance the abilities to teach or perform job duties. *Grades from past semester (2 nd semester of leave)	Official sealed transcript if in 2 nd semester of leave <i>Must come in person to Leaves Office for reinstatement</i>
Assault Leave	Paid up to 20 days	APS or APD police report and medical documentation	Release from health care provider <i>Must come in person to Leaves Office for reinstatement</i>
Catastrophic Leave	Employees NOT covered under a negotiated agreement Available accruals used plus donated time	Employee-Certification of Health Care Provider or Family-Certification of Health Care Provider and Catastrophic Leave Application-Recipient	Employee: Release from health care provider <i>Must come in person to Leaves Office for reinstatement</i>
Domestic Violence Leave	Employee: Available accruals used Family Member: Unpaid	Police report or court documentation	<i>Must come in person to Leaves Office for reinstatement</i>
Illness in the Immediate Family	Limited to 3 days of sick leave, and personal/annual accruals	Family-Certification of Health Care Provider	<i>Must come in person to Leaves Office for reinstatement</i>
Injury or Illness of Covered Military Service Member	Limited to 3 days of sick leave, and personal/annual accruals	WH385	<i>Must come in person to Leaves Office for reinstatement</i>
Intermittent Leave	Employee: Available accruals used Family Member: Limited to 3 days sick leave, and personal/annual accruals	Employee-Certification of Health Care Provider or Family-Certification of Health Care Provider	<i>Must come in person to Leaves Office for reinstatement</i>
Medical Leave	Available accruals used	Employee-Certification of Health Care Provider	Release from health care provider <i>Must come in person to Leaves Office for reinstatement</i>
Military Leave	See Negotiated Agreement	Military Orders or Commander's Letter	<i>Must come in person to Leaves Office for reinstatement</i>
Parental Leave (birth of child)	Limited to 40 days of sick leave, and personal/annual accruals	Employee-Certification of Health Care Provider	Release from health care provider if prior to 6-8 weeks from date of delivery <i>Must come in person to Leaves Office for reinstatement</i>
Parental Leave (non-birth)	Limited to 30 days of sick leave, and personal/annual accruals	Family-Certification of Health Care Provider, or Legal Documentation of Adoption/Foster Care Placement	<i>Must come in person to Leaves Office for reinstatement</i>
Part-Time Leave	A Schedule Employees only Paid—when working Unpaid—when not working	Statement Page	<i>Must come in person to Leaves Office for reinstatement</i>
Personal Leave	Unpaid	Statement Page	<i>Must come in person to Leaves Office for reinstatement</i>
Political Leave	See Negotiated Agreement	Confirmation of Appointment	<i>Must come in person to Leaves Office for reinstatement</i>
Qualifying Exigency	Unpaid	WH384	<i>Must come in person to Leaves Office for reinstatement</i>
Union Leave	Unpaid	Form A	<i>Must come in person to Leaves Office for reinstatement</i>
Workers' Compensation	Limited to available sick time accruals only	Concentra Medical Document 830-8469	Release from Health Care Provider <i>Must come in person to Leaves Office for reinstatement</i>