



## **Catastrophic Sick Leave (SLB) and FMLA Request**

To request Catastrophic Sick Leave and/or FMLA, please complete this form, attach medical certification form completed by your physician with the approximate effective dates/timeframe and submit by email to the following and at the Marengo County Board of Education:

Tyesha Thompson, HR Supervisor  
[tyeshathompson@marengo.k12.al.us](mailto:tyeshathompson@marengo.k12.al.us)

Tiara Calhoun, Staff Accountant  
[tiaracalhoun@marengo.k12.al.us](mailto:tiaracalhoun@marengo.k12.al.us)

***Both requests require board approval and should be submitted PRIOR to the requested time off.***

**Please Print:**

Employee's Full Name \_\_\_\_\_ School \_\_\_\_\_

Beginning Date \_\_\_\_\_ Approximate Ending Date \_\_\_\_\_

**Please select all that apply:**

\_\_\_\_\_ As a member of the MCS Sick Leave Bank, I am requesting **Catastrophic Sick Leave** and understand that donated days, if approved by the Sick Bank Committee, will not be awarded until all my sick days, personal leave and/or vacation days have been exhausted. (A catastrophic illness is any illness, injury, pregnancy, or a medical condition related to pre-childbirth, certified by a licensed physician, which causes the member to be absent from work for an extended period of time.)

\_\_\_\_\_ I am requesting coverage under the **Family Medical Leave Act (FMLA)** and acknowledge that I have worked for MCS for at least 12 months or more. I understand that any of my sick, personal and/ or vacation leave will run concurrently from the date of first absence as long as the need results from one of the qualifying reasons under FMLA. FMLA qualifiers include birth/care of a newborn child, adoption/foster care placement with an employee, care for an immediate family member with a serious health condition, or medical leave when the employee is unable to work due to a serious health condition.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Employee Signature

**For Office Use:**

Rec'd \_\_\_\_\_ Medical Certification: \_\_\_\_\_ PAS: \_\_\_\_\_ SLB notice: \_\_\_\_\_