

Please see AFSCME Collective Bargaining Agreement Article 26:

*The amount of time off work with pay shall be **only** that which is **required** to attend the funeral service **and/or** make necessary funeral or service arrangements, **and** (prior to or subsequent to the funeral or service) financial, custodial, or other necessary arrangements for surviving family member, **but** in no event shall exceed three work days.*

*If additional time off is needed, the employee may request the use of accrued PTO time.
In the event that an employee is on PTO, the provisions of Article 26 nevertheless shall apply.*

Date of Request: _____

Employee's Name: _____

Department: _____

Employee UMID#: _____

Deceased Relative's Name: _____

Relationship to Employee: _____

Date of funeral/service: _____

Amount of time requested off to attend funeral/service, make necessary funeral/service arrangements, or make financial, custodial, or other necessary arrangements for surviving family member.

Date requested off: _____

Total amount of time off work with pay: _____ (maximum 8 hours per day, not to exceed 3 days)

Date, reason and amount of additional PTO, if applicable: _____

Please attach supporting documentation (e.g. Obituary, Memorial Program, Notice from Funeral Home, News Article, etc.) _____

Employee's Signature: I certify that the above statements are true and correct. _____

Supervisor's Signature: _____ Approved _____ Denied

_____ Date