

This form is to be used to track employee FMLA qualifying absences.

Last Name:										First Name:										Middle Name:									
UMID:								Department:												FMLA Benefit Year:									

Month	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Calendar Days* or Hours** Used		
Jan																																		
Feb																																		
Mar																																		
Apr																																		
May																																		
Jun																																		
Jul																																		
Aug																																		
Sep																																		
Oct																																		
Nov																																		
Dec																																		

TOTAL:

*If using calendar days, there is a maximum of 84 calendar days (12 weeks x 7 days) of FMLA coverage. Tracking an FMLA absence with calendar days is **only** appropriate for continuous absences.

**If using hours, the maximum duration of FMLA coverage is determined by multiplying twelve weeks by the employee's regularly-scheduled hours per week (for example, 12 weeks x 40 hours = 480 hours). Time is recorded by hours taken on a regularly scheduled work day. Hours can be used to track a continuous absence and is the preferred method for tracking the intermittent use of FMLA eligibility and reduced schedules.

If the employee transfers to another department prior to the end of the FMLA benefit year, a copy of this form should be forwarded to the new department.