



HUMAN RESOURCES DEPARTMENT
225 Central Avenue West
Brockville, ON, K6V 5X1
askuchr@ucdsb.on.ca

REQUEST FOR AN UNPAID LEAVE OF ABSENCE – ALL EMPLOYEES
(NOT to be used for Personal Days)

Leave requests must be in accordance with your respective Collective Agreement (i.e. acceptable reasons for unpaid leave and unpaid leave request timelines)

Identify your employee group: ETFO [] CUPE [] PSSP [] OSSTF [] Non-Union [] P/VP []

EMPLOYEE: All information is required. Please print clearly below.

Name Employee ID Job Title Work Location

Detailed Reason for Leave Request (reasons marked 'personal' will not be accepted)

1st Day on Leave 1st Day Back to Work FTE of Leave:

Secondary Teachers Only: Semester One FTE of Leave: Semester Two FTE of Leave:

Please confirm your return from leave date via askuchr@ucdsb.on.ca four (4) weeks prior to your return to work.

IMPORTANT: PLEASE READ BELOW

BENEFITS: Benefit coverage while on leave is in accordance with your respective Benefits Trust. Please contact your Benefits Trust for any questions related to your continuation of benefits.

LONG TERM DISABILITY (LTD): Not applicable for PVPs as LTD is through OPC

- LTD is administered by the UCDSB, all other benefits have transitioned to your Benefits Trust.
- To calculate your monthly LTD premiums, if you wish to maintain LTD while on leave, click on the AskUC icon located on the main page of INSITE and search 'Calculating LTD Premiums'. Or, your LTD deduction amounts can be viewed on your bi-weekly pay reports via Self-Serve on the main page of INSITE.
- If on an unpaid leave for supported medical reasons, you will not be eligible to carry LTD coverage while on leave.
- If you decline to maintain LTD coverage there may be exclusions to your eligibility when you return from leave.

MAKE YOUR SELECTION: *Maintain LTD [] Decline LTD []
(*Mandatory for ETFO employees)

- Premiums will be collected from you on the last business day of each month.
- We will deduct the monthly cost from the bank account that is currently on file unless otherwise notified in writing.

CERTIFICATION: Teachers and RECEs must ensure their certification is in "Good Standing" effective the date of return to work.

Signature of Employee Date

PRINCIPAL/SUPERVISOR: (not required for medically supported leaves) Request Supported [] Not Supported []

Signature of Principal/Supervisor Date

HUMAN RESOURCES DEPARTMENT: Request Approved [] Not Approved []

Comments:

Signature of Human Resources Officer Date