

## Request Form for COVID Administrative Leave

Subject to HR review and approval. If approved for June 2020, employees may use 2/3 COVID Administrative Leave on an interim basis during HR evaluation, and may supplement 1/3 with available leave or LWOP. After review HR will provide specific guidance to address your situation.

Provisions will change for July. Approvals for COVID Administrative Leave for July will be limited to 1/3 of salary.

I. EMPLOYEE DATA			
Employee Name:		UID:	
Email Address:		Phone Number:	
Supervisor Name:		Supervisor Email:	
II. REASON FOR LEAVE: UNABLE TO WORK BECAUSE:			
III. EFFECTIVE DATES OF LEAVE REQUEST:			
CSAL Start Date:		CSAL End Date:	
Type of Leave Requested (Check One): <input type="checkbox"/> Continuous/Block Leave <input type="checkbox"/> Intermittent Leave <input type="checkbox"/> Reduced Schedule			
If you are requesting intermittent leave or a reduced work schedule, please describe your schedule below:			

IV. SUPPLEMENTAL LEAVE COVERAGE – <i>This leave is capped at 2/3 of regular pay up to \$200 daily. An employee may request to use other available paid leave to receive their full pay.</i>	
Do you plan to use available paid leave to supplement COVID Administrative Leave?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Type of Leave (Check all that apply):	<input type="checkbox"/> Compensatory Leave <input type="checkbox"/> Vacation Leave <input type="checkbox"/> Sick Leave <input type="checkbox"/> Bonus Leave <input type="checkbox"/> Other
V. EMPLOYEE ATTESTATION AND SIGNATURE	
I understand that providing false or misleading information regarding the need for any condition is grounds for corrective action, up to and including termination of employment.	
Employee's Signature:	Date:

Email this form to [benefits@uncg.edu](mailto:benefits@uncg.edu). For questions, please call Benefits at 336-256-0342 (fax:336-334-5585)