

Leave Administration Form | Leave Without Pay



King County

Department of Human Resources Leaves Administration Team

Please complete and sign the following information and give to your agency human resource professional.

EMPLOYEE	Employee Name _____		Phone _____		Email _____	
	Home Address _____			City _____	State _____	Zip _____
	Employee ID _____	Supervisor Name _____			Work location _____	
	Purpose of Leave Without Pay: <input type="checkbox"/> Medical <input type="checkbox"/> Non-Medical <input type="checkbox"/> Unpaid Holiday for Religious Purposes					
	Start date of requested leave: _____			Anticipated return to work date: _____		
	Brief description of requested leave (do not provide specific medical details): _____					

I have read and understand the important information section and have submitted this form for approval. The information that I have provided is true, correct, and complete. I understand that if I have falsified any information related to my LWOP, it may lead to disciplinary action up to and including discharge from employment. I will notify my supervisor/appointing authority if and when there are changes to the circumstances of my LWOP. **I understand that this LWOP is not approved until all approving parties have signed this form, that approval of this leave is at the discretion of my Department, and that approval of my LWOP may be revoked.**

Employee signature _____ Date _____

PAYROLL/HR	As of (date) _____, the employee has the following hours of accrued and other paid leave: _____ Vacation leave _____ Sick leave _____ Compensatory time _____ Other (describe) _____
	Date that protected leave ends (e.g., FMLA, KCFML, WFCA) _____
	Is Employee eligible for comprehensive leave benefits under the Affordable Care Act for the remainder of the year and/or the following calendar year? Remainder: <input type="checkbox"/> Yes <input type="checkbox"/> No Following year: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown (Email acaadministration@kingcounty.gov for eligibility. ACA does not provide job protection)

SIGNATURES	Leave is 30 calendar days or less	<input type="checkbox"/> Approved <input type="checkbox"/> Denied
	Division Mgr signature _____ Name _____ Date _____	
	Non-Medical: Leave is more than 30 calendar days	<input type="checkbox"/> Approved <input type="checkbox"/> Denied
	Division Mgr signature _____ Name _____ Date _____	
	Medical: Leave is more than 30 calendar days	<input type="checkbox"/> Approved <input type="checkbox"/> Denied
	Dir of DHR (or designee)/Transit Disability Svcs signature _____ Name _____ Date _____	

Comments: _____

Agency Payroll/Human Resources Contact

File the original signed form in the employee's file and give a copy to the employee. Employee medical information should be filed in the employee's protected leave folder and the supervisor should not have access to medical information.

Agency payroll contact (print name): _____ Date: _____

Agency human resources contact (print name): _____ Date: _____

Employee Personnel File (non-medical LWOP) Employee Medical File (medical LWOP) Employee Copy

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Important Information

King County Code Title 3 - 3.12.250:

- A. An employee eligible for comprehensive leave benefits may take a leave of absence without pay for thirty calendar days or less if authorized in writing by the employee's division manager.
- B. An employee eligible for comprehensive leave benefits may take a leave of absence without pay for more than thirty calendar days for nonmedical reasons if authorized in writing by the employee's division manager.
- C. An employee eligible for comprehensive leave benefits may take a leave of absence without pay for more than thirty days for medical reasons if authorized in writing by the director.
- D. An employee lawfully using Washington paid family and medical leave, including providing King County appropriate notice, does not need to request approval for the employee's unpaid leave of absence from King County.
- E. Leaves of absence without pay shall not exceed one year except that the director may, in special circumstances, grant an extension beyond one year.
- F. Other employee benefits as provided in this chapter shall not be provided to or accrue to the employee while on leave of absence without pay, except as provided in K.C.C. 3.12.220 or K.C.C. 3.12.040.
- G. If a leave of absence without pay was granted for purposes of recovering health, the employee shall be required to submit a physician's statement concerning the employee's ability to resume duties prior to return to work.
- H. An employee on leave of absence without pay may return from the leave before its expiration date if the employee provides the division manager with a written request to that effect at least fifteen days prior to resuming duties.
- I. Failure to return to work by the expiration date of a leave of absence without pay shall be cause for removal and shall result in termination of the employee from county service.
- J. A leave of absence without pay may be revoked by the employee's division manager or the director upon evidence submitted to the director by the division manager of the employee indicating that such leave was requested and granted under false pretenses, or that the need for such leave has ceased to exist.

Other Information:

- When you go on unpaid status, your sick leave, vacation leave and other benefits stop accruing, and gaps in your county employment may impact you (i.e., probationary period, seniority, retirement service credit, vacation accrual rate, etc.).
- Except for unpaid religious holidays, your position must be eligible for comprehensive leave benefits to request LWOP.
- When approving a leave without pay (LWOP), agencies are approving the entire period of time off including all paid leave. All paid leave must be used before entering an unpaid status. Use of paid sick leave is governed by the King County [Paid Sick Leave Policy](#). Example: An employee is requesting to take off six total weeks for a non-medical reason. The employee has two weeks of vacation leave and no other paid leave. The LWOP form would be approved for the entire six-week period with the first two weeks using vacation leave and the last four weeks in an unpaid status.
- An LWOP for medical reasons may require sufficient medical documentation be provided prior to, during and upon return to work in consultation with Disability Services and your agency human resource professional.
- An LWOP for unpaid religious holidays may be denied if the leave imposes an undue hardship or the employee is necessary to maintain public safety (WAC 82-56-020).
- Budget cuts and layoffs may end an approved LWOP leave prematurely. The layoff, seniority and bumping rights in each individual contract still apply.
- Once a Leave Without Pay has been approved there may be impacts to your medical and non-medical benefit coverages. Discuss possible impacts with your agency human resource professional. Some employees will be eligible for a continuation of medical benefits through the rules of the Affordable Care Act (ACA).
- If your spouse or state-registered domestic partner works for King County you may be eligible to be covered under their medical coverage. Please contact the Benefits office with any questions at 206-684-1556 or KC.Benefits@kingcounty.gov.
- The decision to grant an LWOP shall be at the discretion of King County, except as limited by collective bargaining agreements. Managers should consider all impacts and costs before approval.
- Previously approved paid leave, contractually mandated leave, or a leave for medical or military reasons already submitted by other employees in the work group may take precedence over an LWOP request.