

OHR end-user documentation overview

Employee Military ASU Leave | Non-FLMA

Benefits Design and Management Office of Human Resources



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Purpose	This document outlines the basic information you will need in order to approve and process an employee's request for the following type of leave: Employee Military- ASU Leave Non-FMLA			
Objectives	After reading this guide, you will be able to determine an employee's eligibility for leave and complete the appropriate leave paperwork.			
Overview	The forms required for leave administration have been designed to provide the mandated information required by ASU policy and/or federal regulations.			
Employee eligibility	Classification: • Faculty • Academic professional • Administrator • University staff • Classified staff • Student worker • Postdoctoral scholar • Teaching assistant • Research assistant Employment type: • Regular • Long-Term temporary Working hours: • Full time • Part time			
Reason for leave of absence	An employee is eligible for leave for the following reasons: For voluntary or involuntary active duty or training in any branch of the uniformed services.			
Duration of leave of absence	An employee may perform service in the uniformed services for a cumulative period of up to five years and retain reemployment rights with ASU. For exceptions, contact the OHR Disability and Leaves Program Management Unit.			



Definitions	Uniformed Services: U.S. Army, U.S. Navy, U.S. Marine Corps, U.S. Air Force, U.S. Coast Guard, U.S. Army National Guard, Air National Guard, and the U.S. Public Health Service Commissioned Corps.	
	Leave of absence: A paid or unpaid employment category designating that an employee is in a nonwork status.	
	Leave benefit plan: A benefit — e.g. vacation, sick or parental leave benefit — that compensates the employee when he/she is absent from work.	
Step 1 Determir	ne leave process	
In order to effe your particular	ctively manage leaves, it is important to understand the process in dean or vice provost area.	
Centralized One person — administrator, o dean or vice pr	e.g. a department leaves representative, a BOM, a data time or an HR manager — handles all aspects of the process for your rovost area.	
Decentralized Each separate vice provost are section.	division — office, unit, department or team — within your dean or ea handles the entire process for the employees in that particular	
Hybrid The process is handled individually by each separate division but channeled through one main authority in your dean or vice provost area.		
Step 2 Receive	or issue leave of absence request form -	
employe	e military (<u>PDF</u>)	
When the need 30-day written employee must	I for leave is foreseeable, an employee is required to give at least a notice. If the leave is required due to an unforeseeable event, the t provide as much notice as is practicable under the circumstances.	
 Department red -or- 	ceives leave of absence request form — employee military.	
Department iss	sues leave of absence request form — employee military.	
 In the case of e department lea determining the 	employee's inability to complete the necessary paperwork, the wes representative should complete the form immediately upon a employee will be absent for this purpose.	

• Complete the employee and/or supervisor sections, as applicable.



•	Indicate date form issued to employee on copy and place in employee's leave file.
	Important: Confidential leave and medical information must be kept in a secured
	and separate file from the department personnel files. Departments will be
	audited periodically to ensure compliance.

• Fax copy to Disability and Leaves Program Management Unit at 480-993-0007.

	LEAVE OF ABSENCE REC EMPLOYEE MILITARY	QUEST FORM LEAVE
	EMPLOYEE COMPLETE - SUBMIT TO SUPERVISOR OR D	EPARTMENT LEAVES REPRESENTATIVE
	Employee Name:	Date:
	Employee 10-digit ID Number:	
	Requested Dates: From: (first day of lea	we) To:(proposed return to work date)
	Type of Leave Requested: Annual Training	Active Duty Branch
	Name of military headquarters issuing orders:	
	Order Number:	Date of Order:
	Date to report for active duty:	Anticipated length of duty:
	PLEASE ATTACH A COPY O	E VOUR MULTARY ORDERS
	As a policy dows for paid whitary love of a proce for over	riogrant to ensued 30 render this in a store of secutive
	As a policy days for said natitary love of a more for mer	riognet to enneed 30 mendar the in a netwo of meetuin
Step	3 Issue the ASU employee mi designation notice (PDF)	ilitary leave



-		
	ASU LEAVE DESIGNATION NOTICE EMPLOYEE MILITARY	
	DATE:	Employee 10-digit ID:
	10:	
	FROM:	
	College or Department Name	College or Department Number
	FAX THIS FORM TO: HR DISABILITY & LEAVES PROGRAM MAI	NAGEMENT UNIT AT 480.993.0007
	Dear	
	This Notice acknowledges receipt of your request for military leave. You will be gran of military service in accordance with applicable federal and state laws. It is understo	ted a leave of absence for the designated period od that your leave will start effective
	ASU policy allows for a paid military leave of absence for a period not to exceed 30 ca Cocal (Or ther 1-80 tember 20) year	lendar days in any two consecutive federal
	If the employee has a disability that incurred in, or operiod of service, the deadline for reinstatement to up to two years. ASU must make reasonable effort disability and to help the employee become qualifier reemployment position. The department must contact an Americans with D extension 5-9695 prior to taking any termination action.	was aggravated during, the employment may be extended ts to accommodate such a ed to perform the duties of the isabilities Act consultant, at tion.
Step	5 Complete the leave of absence stat	us change form (<u>PDF</u>)
Issue	this form in the nav period any of the following ever	nts occur
•	The duration of leave period changes	
	The type of leave changes	
	The nav status changes	
	The omployee returns to work	
	Fax to Disability and Loaves Program Managemen	t Init at 480-003-0007
•	Fax to Disability and Leaves Flogram wanagement	t Offit at 480-995-0007.
	Important: Confidential leave and medical inform and separate file from the department personnel audited periodically to ensure compliance.	nation must be kept in a secured files. Departments will be



Employee Military ASU Leave | Non-FMLA

	LEAVE OF ABSENCE	E STATUS CHANGE FORM	
Emplo	oyee Name	Date:	
Emplo	oyee 10-digit ID Number:		
Depar	rtment Name:	Department Number:	
CHA	NGE LEAVE DATE Revised Leave Begin Date	:	
	Revised Return to Work Date:		
СНА	NGE LEAVE TYPE EFFE	CTIVE DATE:	
From	: FMLA To:	FMLA	
	Extended Leave (Staff)	Extended Leave (Staff)	
	Extended Leave (Staff): Workers' Compensation	Extended Leave (Staff): Workers' Compensation	
	Health Related Leave (Faculty/sick)	L com With out Day (E cultur)	
	Leave Without Pay (Faculty) Leave Without Pay (Faculty): Workers' Compensation	Leave Without Pay (Faculty) Leave Without Pay (Faculty): Workers' Compensation	
	Parental	Parental	
	Distance of the second second	man	
Time rep	orting		
The employe	ee should already have complete	d the request-for-time-off form — or	
used the dep	partment's alternative request pro	ocess — and the leave should be	
approved. Th	he department leaves representa	tive or department time administrator	
is then respo	onsible for recording an employee	e's leave hours while the employee is	
absent from	work.		
Т	o record time in HRIS, follow the	se steps.	
	1. Manager self service	•	
	2. Time management		
	3. Report time		
	4. Timesheet		
	5. Click: Get Employees		

- 6. Select employee
- 7. View Time Period
- 8. Enter the number of hours of eligible time daily. See image below.





Description	Pay Code		
Military, paid	MIL (salaried) MIP (hourly)	Use for any of the 30 days of paid military time the employee has available.	
Compensatory time, paid	CTH (hourly)	An employee may use any	
Vacation, paid	VAC (salaried) VAH (hourly)	available time to remain in a paid status.	
Unpaid vacation Unpaid vacation	UVS (salaried) UVH (hourly)	Use only when an employee has both paid and unpaid time in the same pay period — e.g. 50 hours VAC and 30 hours UVS.	
		Because the employee is still in an active paid status, a salaried employee would continue to be paid full salary if the unpaid sick code is not used.	
If an employee has no paid hours available in a pay period, issue the leave of absence status change form and report no hours.			
ore information			
Contact OHR Benefits Design and Management Disability and Leaves Program Management Unit			
For department use only Your Leaves Management Partner /cfo.asu.edu/hr-benefitspartners.			
Email <u>HR_Disability@asu.edu</u>			



Process checklist

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Forms and

ACD policies Policy references 704-02 Vacation leave-fiscal year appointment 707 Leave of absence without pay

SPP policies

404-04 Overtime 702-01 Vacation leave 705-01 Extended leave of absence

Forms

Generic to all leaves. Leave of absence status change form

Specific to employee personal.

Leave of absence request form — employee military Designation notice — ASU Leave