

General Leave of Absence Request / Extension / Return from Leave Form

Instructions:

Complete all relevant sections of this form, then sign and date it in Section 4 and return by email to HRGeneralLeave@cbe.ab.ca or fax 403-541-5640. Please review page two before completing.

Section 1: Employee Information While on Leave											
Last Name:				Legal First Name & Ini							
Employee ID:		Positi	tion:			Union		n / Association:			
Location/School:											
Home Mailing A	al code)										
Home Phone:			Mobil	le Phoi	ne:				Home Email:		
Section 2: Leav	e Re	quest									
☐ General Leave			Date(s): to (DD/MMM/YYYY)								
☐ Temporary Leave without Pay (10 days or less)			Reason (attach another sheet or letter if necessary, include employee id#):								
All leave requests require review and approval by appropriate HR delegate prior to commencement of leave.											
The employee will be advised of the status of the request in writing.			I am aware of this application request pending approval of the HR delegate. I declare that the performance of the employee is not under evaluation and not currently under documentation.								
Principal or Supervisor must acknowledge, sign and date the statement to the right.			Principal / Supervisor Name: Date: Date:								
Special consideration or concerns may be documented in the Reason area of Section 2.			Principal / Supervisor Signature: Comments:								
Section 3: Return From Leave											
☐ Return from Leave			Effective Date: (DD/MMM/YYYY) *I acknowledge my professional responsibility to inform the CBE of my intention to return at least 30 days in advance.								
Section 4: Acknowledgement											
I hereby acknowledge that I have read and understand the Collective Agreement or Exempt Terms and Conditions of Employment											
requirements and instructions listed on page 2.											
Employee's Sig		of Alberta's Freedom of Information and Protection of Privacy Act (FOIP). This information will be used for the									
management of personnel and for the delivery of various Human Resources programs at the Calgary Board of Education. It will be treated in accordance with the privacy protection provisions of FOIP. If you have any questions about the FOIP Act, please access http://www.cbe.ab.ca/legal/foip . If you have any questions about this form and/or the use of the information, please contact the Employee Contact Centre at (403) 817-7333.											ce with the privacy
HR Use Only		Received	In	itial		Processing					
							1				

Please read the following information prior to completing the General Leave of Absence Request/Extension/Return from Leave Form.

Review the leave entitlements/provisions of your <u>Collective Agreement or Exempt Terms and Conditions of Employment</u> prior to requesting a leave of absence.

- **General Leave** requests require the acknowledgement and signature of your principal or supervisor. Please refer to your <u>Collective Agreement or Exempt Terms and Conditions of Employment</u>.
- <u>Temporary Leave Without Pay</u> requests require the acknowledgement and signature of your principal or supervisor. Please refer to your Collective Agreement or Exempt Terms and Conditions of Employment.

ATA - New General Leave Request:

- As per the Collective Agreement, applications must be submitted by March 15th of the school year prior to the commencement of the leave, except in the event of emergent or unforeseen circumstances.
- Final approval for all requests will be determined by the end of March, and the decision emailed to your CBE email address by the third week in April.

ATA – General Leave Extension:

- As per the Collective Agreement, all requests must be submitted by February 15th of the school year of the original general leave.
- The final approval process for the Leave Extension will be completed, and the decision emailed to your CBE email address by March 10.

Support Staff - General Leave Request and Extension

- Requests can be submitted throughout the school year. Please ensure adequate notice is provided as per your collective agreement.
- A final decision for your leave request will be completed within 10 business days from the date of receipt, and confirmation will be sent to your CBE email.

Instructions: Complete all relevant sections on this form, then sign and date it in Section 4 and return by email to HRGeneralLeave@cbe.ab.ca or fax 403-541-5640.

Section 1: Employee Information

Please provide all current information including your contact information while on leave.

Section 2: General Leave or Temporary Leave Without Pay

Complete this section to request a general leave of absence or temporary leave without pay.

Principal or supervisor acknowledgement/signature is required.

Please provide **all relevant** details necessary for the review process.

Section 3: Return From Leave

It is your professional responsibility to inform the CBE of your intention to return within a minimum of 30 days.

Section 4: Acknowledgement

Ensure this form is signed and dated

Please direct any questions regarding your general leave request to the HR Employee Contact Centre at: 403-817-7333 or email ecc@cbe.ab.ca