



TOWN OF PALM BEACH
EMERGENCY FAMILY MEDICAL LEAVE
REQUEST FORM

Employee Name:	Job Title:
Phone number:	Department:
Email:	Immediate Supervisor:

I am requesting Emergency Family and Medical Leave (EFMLA) due to the COVID-19 public health emergency, in order to care for:

- A. My child (as defined below) who is under the age of 18;
- B. My child who is 18 years of age or older (as defined below); or
- C. A child (who is under the age of 18) for whom I have day-to-day responsibility to care for and financially support.

Child Name	Date of Birth

Child is defined as your own child, which includes your biological, adopted, or foster child, your stepchild, a legal ward, or a child for whom you are standing in loco parentis—someone with day-to-day responsibilities to care for or financially support a child; or an adult son or daughter (i.e., one who is 18 years of age or older), who (1) has a mental or physical disability, and (2) is incapable of self-care because of that disability.

Due to:

- A. Closed school or place of care

Name of School/Care	Phone Number	Date of Closure

- B. Childcare provider unavailable

Name of Provider	Phone Number	Dates of Unavailability

If you childcare provider, school, or place of care provided documentation of closure, please attach to this notice. The Town reserves the right to validate closure with the provider, facility, or school.

Are you currently on or have used FMLA in the past 12 months? Yes ___ days used in past 12 months. No
If yes, please note that E-FMLA leave does not extend the 12 weeks allowed under FMLA and approval will be based on the remaining leave balance.

Are you able to work from home? Yes No

I request my E-FMLA leave on ___ / ___ / ___ until ___ / ___ / ___

Pursuant to AP# 1-20-7, I understand the first 10 days of leave is unpaid. I may elect to use one or more of the following to supplement my pay during the initial 10-day period:

- I elect to use Emergency Paid Sick Leave (EPSL) before using any other paid leave during the initial 10- day period.
- I elect to use Town leave to supplement any difference between EPSL and my regular rate of pay, the Town leave shall be used in this order: pandemic personal leave, sick, compensatory, annual, or other available leave such as personal, administrative, or floating holiday leave.

Employee Signature

Date