

**BONSALL UNIFIED SCHOOL DISTRICT**

**Leave of Absence – Maternity/Paternity**

**Planning Form**

Name: \_\_\_\_\_

# Sick Days: \_\_\_\_\_

Pregnancy Disability Leave (PDL)	California Family Rights Leave (CFRA)
<ul style="list-style-type: none"> <li><input type="checkbox"/> Six (6) weeks after birth</li> <li><input type="checkbox"/> Eight (8) weeks (Doctor's Note)</li> <li><input type="checkbox"/> Extending Leave</li> </ul> <p style="text-align: center;">*PDL &amp; FMLA run concurrently</p>	<p style="text-align: center;">*First 12 months after birth or placement</p> <ul style="list-style-type: none"> <li>• Additional 12 weeks for bonding                             <ul style="list-style-type: none"> <li>✓ Must have 12 months of continuous contracted services</li> <li>✓ Must have at least 1250 hours during the prior 12-month period</li> </ul> </li> <li>• A partial work week = 1 week of bonding</li> <li>• Any vacation weeks are not included as one of the 12 weeks</li> <li>• Sick days must be exhausted first Approx.. date _____ Verified date _____</li> <li>• Will be placed in differential pay status (daily rate minus actual sum paid for sub)</li> </ul>

**\*75% of the year = 135 days**

**\* Probationary teachers must provide service 75% of instructional year to gain a step**

**\*Permanent teachers must be in paid status 75% of the school year to gain a step**

Date of planned return: \_\_\_\_\_

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_