



King County

# Leave of Absence Without Pay (LWOP) Request Form

Date Received from Employee  
\_\_\_\_\_

**To be Completed by the Employee – Please Print**

Employee Name:	Phone:	Email:		
Home Address:	City:	State:	Zip:	
Purpose of Leave Without Pay: <input type="checkbox"/> Medical <input type="checkbox"/> Non-Medical <input type="checkbox"/> Unpaid Holiday for Religious Purposes				
If medical, does this LWOP period follow an existing protected leave (FMLA/KCFML/WFCA/PCPRC) of absence? <input type="checkbox"/> Yes <input type="checkbox"/> No				
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 \_\_\_\_\_

**Forward signed form to your agency human resource professional**

<b>PAYROLL/HR</b>	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) _____
	<input type="checkbox"/> Eligible for comprehensive leave benefits* under the Affordable Care Act? (contact <a href="mailto:acaadministration@kingcounty.gov">acaadministration@kingcounty.gov</a> )** Remainder of current calendar year <input type="checkbox"/> Yes <input type="checkbox"/> No      Following calendar year: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Undetermined <small>(*ACA does not provide job protection. **Except for leave as an accommodation under federal ADA or WA State unpaid religious holidays)</small>

<b>SIGNATURES</b>	<b>Leave is 30 calendar days or less</b>	<input type="checkbox"/> Approved <input type="checkbox"/> Denied
	Division Manager signature _____ Name _____ Date _____	
	<b>Leave is greater than 30 calendar days for <u>non-medical</u> reasons</b>	<input type="checkbox"/> Approved <input type="checkbox"/> Denied
	Division Manager signature _____ Name _____ Date _____	
	<b>Leave is greater than 30 calendar days for <u>medical</u> reasons</b>	<input type="checkbox"/> Approved <input type="checkbox"/> Denied
Director of DHR (or designee)/Transit Disability Services signature _____ Name _____ Date _____		

Comments: \_\_\_\_\_

**Department Payroll/Human Resources Contact**

Has all information been completed and appropriate signatures collected? Agency human resource professional will process the appropriate Personnel Change Notice in PeopleSoft. One copy should be given to the employee and original placed in employee's file.

Department payroll contact (print name): \_\_\_\_\_ Date: \_\_\_\_\_

Department human resources contact (print name): \_\_\_\_\_ Date: \_\_\_\_\_

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

**Important Information for Employees**

- Except for unpaid religious holidays, your position must be eligible for comprehensive leave benefits in order to request an LWOP
- This form is not needed for an LWOP used in conjunction with an approved workers compensation injury
- When a leave of absence without pay is used in conjunction with paid leave time, all paid leave must be used first. If leave is for a non-medical reason, sick leave usage is governed by existing sick leave policies
- An LWOP for medical reasons may require sufficient medical documentation prior to the beginning of the leave and periodically for the duration of the leave in consultation with Disability Services
- An LWOP may be revoked by the Director of Human Resource (DHR) upon evidence that the leave was requested and granted under false pretenses or when the need for such leave has ceased to exist
- 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)
- Failing to return to work by the expiration date of your LWOP may result in termination from county service
- You may return from your LWOP leave before its expiration date if you provide a written request at least 15 days prior to resuming duties
- If leave was granted for medical reasons you are required to submit a return to work release before returning to work
- Required approvals:
  - 30 calendar days or less: Must be approved by your Division Manager (or designee)
  - 31-365 calendar days non-medical: Must be approved by your Division Manager (or designee)
  - 31-365 calendar days medical: Must be approved by your appointing authority and by the Director of DHR (or designee) or Transit Disability Services
  - More than 365 calendar days: Under special circumstances may be approved by the Director of Human Resources (DHR)
- An LWOP may impact your medical (medical, dental, vision) and non-medical benefits (life, AD&D, LTD):
  - 30 calendar days or less: No loss of county-provided health and insurance benefits
  - 31-365 calendar days non-medical: All county-paid benefits will end on the first day of the month after the LWOP begins
  - 31-365 calendar days medical: All county-paid benefits will end on the first day of the month after the LWOP begins
  - Extension of benefits through the Affordable Care Act (ACA) may be available (contact [acaadministration@kingcounty.gov](mailto:acaadministration@kingcounty.gov))
  - If your spouse or domestic partner works for King County you may be eligible to be covered under their medical benefits. Please contact the Benefits office with any questions at 206-684-1556
- When you go on unpaid status, your sick leave, vacation leave and other benefit accruals stop (except as provided under protected leaves of absence such as FMLA), and gaps in your county employment may affect your probationary period, seniority, retirement service credit, etc. For details, talk to your human resources representative.

#### LWOP Considerations for Management

- The decision to grant an LWOP shall be at the discretion of King County, except as limited by an applicable collective bargaining unit.
- The employee's work can be effectively handled by others during the absence, work can be placed on a temporary hold, or other arrangements can be made to ensure business continuity.
- Granting the LWOP request does not place any undue hardship on the employee's work group.
- Employee should not have received any disciplinary action within the past year or be on a performance improvement plan.
- 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.
- Employees may be eligible for extra months of benefits through the Affordable Care Act (ACA). Agencies should understand the extra cost of approving an unpaid leave of absence. ACA does not provide job protection.