

SECTION 1 - EMPLOYEE INFORMATION

Employee Name:		Job Title:	5-Digit I.D. #:	6-Digit I.D. #: (begins with 2)	
Emp. Contact Phone:	Dept. Name:	Base Location:	Manager Name:		
Emp. Mailing Address:			Full Time <input type="checkbox"/>	Part Time <input type="checkbox"/>	Date of Hire:
If you provide an e-mail address, all correspondence related to your leave will be sent to you via e-mail.		Employee Email Address:			
Do you have a spouse employed at US Airways?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If Yes, 6-digit I.D. #:		

SECTION 2 – LEAVE INFORMATION

Requested Leave Start Date (MM/DD/YYYY):	Requested Leave End Date (MM/DD/YYYY):	Request is for: Block Leave <input type="checkbox"/> Intermittent Leave <input type="checkbox"/>
Reason for Leave Request: (select one from below)		
<input type="checkbox"/> Inability to work as a result of my own serious health condition (includes pregnancy/maternity leave) <input type="checkbox"/> Care for an immediate family member with a serious health condition <input type="checkbox"/> Spouse <input type="checkbox"/> Son <input type="checkbox"/> Daughter (Date of Birth: _____) <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Bonding with my newborn, adopted, or foster care child Date of Birth or Placement: _____ <input type="checkbox"/> Qualifying Military Exigency <input type="checkbox"/> Military Caregiver Leave		

UNDERSTANDING FML

Policy – US Airways will provide job-protected leave for eligible employees for up to a total of twelve (12) work weeks in a twelve (12) month rolling backward period (measured backward from the date an employee uses any Family Medical Leave (FML) for the following qualifying reasons: to attend the birth of a son or daughter; to care for a newborn after birth; to care for a child after placement with the employee for adoption or foster care; to care for a qualifying spouse, son or daughter, or parent who has a serious health condition; absence due to a serious health condition that makes the employee unable to perform his or her job. US Airways will also provide up to twelve (12) work weeks of job-protected leave to eligible employees because of a “qualifying exigency” arising from the employee’s spouse, child, or parent being on active duty or called to active duty in the National Guard or as a reservist in the Armed Forces or any regular component of the Armed Forces in support of a military “contingency operation.” Qualifying exigencies include leave to address issues surrounding short-notice deployment, military events and related activities, childcare and related activities, financial and legal activities, counseling, rest and recuperation, and post deployment activities. Additionally, Military Caregiver Leave provides for up to twenty-six (26) work weeks of job-protected leave to care for a covered service member, including the National Guard, Reserves, active duty Armed Forces, or veterans with a serious illness or injury incurred in the line of duty. Veterans are considered a covered service member if he or she is undergoing medical treatment, recuperation, or therapy for a serious injury or illness that was incurred or aggravated while on active duty in the Armed Forces, whether or not the illness or injury manifested itself before or after the member became a veteran, and he or she was a member of the Armed Forces, National Guard, or Reserves at any time during the five-year period before he or she began treatment, recuperation, or therapy. In addition to spouse, child, or parent, this leave will also cover the employee if they are the Next of Kin. Next of Kin for the purposes of FML is defined as nearest blood relative, other than the covered service member’s spouse, parent, son, or daughter. These two new Military Leave entitlements are not in addition to the standard twelve (12) weeks of FML. An employee approved for FML is entitled to receive continued health insurance coverage under the same terms and conditions as if the employee had continued to work.

Employee Notice Requirement – Where the need for FML is foreseeable, the employee is required to give 30 calendar days’ notice of the need for leave. Where the need for leave was not foreseeable and the employee believes that the reason for a preceding absence may be FML-qualifying, the employee must complete a FML Request Form and request FML paperwork within four (4) calendar days of that preceding absence. US Airways will recode absences up to four (4) calendar days in arrears from the date FML paperwork was requested. Under certain circumstances, a Manager may invoke the use of FML to account for an employee’s time away from work.

Medical Certification – An individual who meets the definition of “health care provider” under the Federal Family Medical Leave Act, and who is the health care provider of the employee or the employee’s family member, must complete and sign the designated portion of the Health Care Provider Form or medical certification.

Leave Pay – FML and Medical Leave of Absence (MLOA) are unpaid leaves of absence. Based upon the Company’s existing leave procedures, the receipt of accrued sick pay, vacation pay, or holiday pay while on a leave of absence may be required or allowed. See your specific CBA for details on types of pay for which you may be eligible while on an FML or MLOA leave of absence.

Insurance – For the duration of the FML and for certain periods of time while on MLOA (that vary with each specific CBA and company policy for non-contract employees), an employee is eligible to continue coverage under any “group health plan” (including medical, dental, and vision plans) provided that the employee continues to make payments on the employee-pay portion of the premium in a timely manner. Employee payments will be billed and paid to Conexis – a third party billing administrator that the Company uses. If you have any questions regarding your premium billing, contact Conexis directly at 877-722-2667.

Travel – Employee travel privileges while on any type of leave may be affected. See specific Collective Bargaining Agreement or contact the US Airways Employee Travel Services office to confirm benefits for yourself and eligible family members. US Airways Employee Travel Services may be reached by dialing 480-693-8717, or e-mail at Employee.Travel@usairways.com.

Bonding Leave – If the employee is eligible for FML, they may be eligible for “Bonding Leave.” This is to care for a newborn child after birth or placement after adoption or foster care and must be taken within the first twelve (12) months of the birth or placement of the child. This leave may only be used in one (1) block of time, not on an intermittent basis. Extensions are not permitted for Bonding Leave.

I understand and agree that my FML request is not complete and will not be considered and/or approved until the request and a completed Health Care Provider form or other Medical Certification is returned to the employee’s manager or Central Administration where applicable.

I have read and agree to all of the terms and provisions listed above along with the complete Family Leave Policy on WINGS. I understand that falsification of information or failure to follow US Airways’ FML policy may result in discipline up to and including termination. Some states may have other leaves that run concurrently with FML.

Employee Signature: _____ **Date:** _____

For additional information, please contact your manager, Leave Administrator, and refer to the Family Medical Leave Policy on WINGS.

NOTE: Requested dates for leave are not guaranteed. Approvals are based on information from the health care provider.