

REQUEST FOR SPECIAL LEAVE AND FAMILY OBLIGATIONS
SUPPORT STAFF

SECTION 1 – TO BE COMPLETED BY THE EMPLOYEE

Name _____ Place of work _____

Date of absence: _____

Duration of absence: From: _____ To: _____ (inclusively)

NOTE: If there is a change in the length of your absence, please notify the Director of Service or the School/Centre Principal.

SECTION 1 – SPECIAL LEAVE – 5-1.00
– TO BE APPROVED BY THE DIRECTOR OF SERVICE OR THE SCHOOL/CENTRE PRINCIPAL

For more information, please refer to articles under clause 5-1.00 of your collective agreement and the article 5.01 of the local agreement. When these days are depleted, absences will be without pay. You can check the status of your bank through the school administration or the Human Resources Department.

- 5-1.01 Death** (including the day of the funeral) (*Motive 90*)
- ☐ Spouse, child, spouse’s child living under the same roof (max. 7 consecutive days, working days or not)
 - ☐ Father, mother, brother, sister (max. 5 consecutive days, working days or not)
 - ☐ Parents-in-law, grandparents, brother-in-law, sister-in-law, son-in-law, daughter-in- law, grandchildren, spouse’s child having lived under the same roof (max. 3 consecutive days (working days or not)
*** ONE ADDITIONAL DAY CAN BE GIVEN TO AN EMPLOYEE ATTENDING A FUNERAL THAT TAKES PLACE MORE THAN 240 KM FROM HIS/HER DOMICILE & TWO ADDITIONAL DAYS CAN BE GIVEN TO AN EMPLOYEE ATTENDING A FUNERAL THAT TAKES PLACE MORE THAN 480KM FROM HIS/HER DOMICILE (*AS PER ARTICLE 5.1.02*)
 - ☐ Former spouse (the day of the funeral) if the child was born from the union and is still a minor and if he/she is present at the funeral
- Marriage** (*Motive 98*)
- ☐ Marriage or civil union of the employee’s parents, brother/sister, or child (the day of the event)
 - ☐ Marriage or civil union of the employee (7 consecutive working day, working days or not) including the day of event
- Change of Residence** (*Motive 91*)
- ☐ Change of the employee’s residence (one day / year)

- 5-1.04** (*Motive 95*)
- ☐ Jury duty/witness
- 5-1.05** (*Motive 71*)
- ☐ Admission exam or test in an educational institution recognized by the MELS
 - ☐ Medical examination (at the request of the school board)
 - ☐ Quarantine
- 5.01 LOCAL AGREEMENT ***
- A maximum of three (3) working days per year to cover an act of God (disaster, fire, flooding) that obliges an employee to be absent from his/her work and for the following reasons:
- ☐ Two (2) days during Xmas & New Year; already scheduled on working calendar
 - ☐ Two (2) days for other religious faiths (*Motive 92*)
 - ☐ One (1) day for personal business (by written request to Human Resources) (*Motive 09*) ((the leave for personal business may be taken in half or full day)

- 5-1.07 ***
- According to article 5-1.07 of the collective agreement, the School Board can also authorize special leave in recognition of special circumstances. The following circumstances have been deemed valid by the School Board. (*Motive 71*)
- ☐ To be interviewed by CQSB – the day of the interview
 - ☐ Medical visit
- *For any other circumstances (i.e. 5-1.07, other than those listed above or for 5-01* Act of god (max. 3 days): Please submit a written request, to the Human Resources department at the School Board at hr@cqsb.qc.ca
- The Director of Human Resources, in consultation with the Director of Service or the School/Centre Principal, will review the request and confirm the decision.

SECTION 2 – PREGNANCY /FAMILY OBLIGATIONS
-TO BE APPROVED BY THE DIRECTOR OF SERVICE OR THE SCHOOL/CENTRE PRINCIPAL

- PROVINCIAL AGREEMENT**
- 5-4.25 Pregnancy**
- ☐ Medical visits related to pregnancy (max. 4 days; may be taken in half-days) (*Motive 42*)
- 5-1.06**
- ☐ Family responsibilities (max. 10 days) (*Motive 10*) To fill obligations related to the looking after, health or education of the employee’s child/spouse’s child or for health reasons pertaining to the employee’s spouse, mother/father, brother/sister or one of the grandparents. Six (6) of the ten (10) days used can be deducted from the annual bank of redeemable sick days or are taken without pay; at the choice of the employee. (may be taken in half or full days)

SECTION 3 – OTHER LEAVES
– TO BE APPROVED BY THE DIRECTOR OF SERVICE OR THE SCHOOL / CENTER PRINCIPAL (*AS PER THE CRITERIA IN THE POLICY ON LEAVES OF ABSENCE*)

- ☐ Short term leave without pay (5 days and less) (*Motive 20*)

Employee’s signature

Approved by Director of Service, School/Centre Principal

Date

Date

NO DATA CAN BE ENTERED IN THE PAY SYSTEM WITHOUT THE SIGNATURES OF EMPLOYEE AND THE IMMEDIATE SUPERVISOR. PLEASE GIVE THE FORM TO THE SCHOOL SECRETARY TO BE RECORDED IN THE PAY SYSTEM. **N.B. ANY INCOMPLETE FORM WILL BE RETURNED TO THE SENDER.**
For board office employees, this document must be transmitted to the Human Resources Services for due recording.