## **Hollingsworth Logistics Group** Leave of Absence Request Form (Please see page 2 for details)

Name: Department: Type of Leave:					
			Personal		
			☐ Family Medical Leave Act		
Homeland					
Reason for the leave:					
Dates of Leave: From:	Return:				
Documentation (may be an atta	achment):				
Employee Signature:	Date:				
Manager Approval:	Date:				
H.R. Approval:	Date:				
Executive Approval:	Date:				

## PERSONAL LEAVE OF ABSENCE

In the event personal obligations require your absence from work for an extended period of time, you are eligible for a Leave of Absence. There are 3 types of leaves: Personal Leave, Family Medical Leave, and Homeland Leave. In order to request this unpaid time off, it must be submitted in writing and submitted to your Supervisor as soon as you become aware of the need. Permission to take unpaid leave will be at the sole discretion of Hollingsworth management and contingent upon Hollingsworth's workload and present staffing situation during the proposed period of absence.

The following guidelines apply to all leaves types:

- An employee must have one year of service to be eligible for a Leave.
- An employee is eligible to request a Homeland or Personal leave once every two (2) years.
- All available vacation time will be paid out on the first and second (if applicable) pay cycle following the Leave start date.
- Vacation time may not be joined with a leave period. (ex. 2 weeks vacation then 4 weeks Leave-resulting in 6 weeks absence.
- A Personal Leave must not exceed 30 days.
- There is no paid Leave of Absence.
- An employee shall accrue seniority during the leave period.
- Failure to return to work on the designated date, without contacting Human Resources will result in termination, effective the designated return date. The HR # is: (313) 768-1275.
- While on leave employee must pay their employee portion of any benefit coverages.
- The leave dates may not be changed once the leave period has begun.
- For Homeland leave, a copy of travel tickets must be included with the request to qualify as well as a copy of a stamped passport must be provided upon return.

I understand the terms and conditions of the Leave of Absence policy.		
Employee Signature	Date	