Designation Notice
(Family and Medical Leave Act)

Instructions: You must inform the employee of any leave that will be counted against their FMLA leave entitlement by providing them with this Designation Notice. Complete this notice when you have determined whether leave is covered under the FMLA after reviewing the supporting certification. If the certification is incomplete or insufficient, this designation form must state what additional information is necessary to make the certification complete and sufficient. Departments must send copies of FMLA information to the Human Resources Benefits Unit.

DATE OF NOTIFICATION:_____

TO: _____ Oracle Employee ID#: _____

FROM: _____ Department: _____
(Department Representative)

We have reviewed your request for leave under the FMLA and any supporting documentation that you have provided. We received your most recent information on _____ and decided:
(Date)

☐ **Your FMLA leave request is _approved_. All leave taken for this reason will be designated as FMLA leave beginning _____.**
(Date)

The FMLA requires that you notify us as soon as practicable if dates of scheduled leave change or are extended, or were initially unknown. Based on the information you have provided to date, we are providing the following information about the amount of time that will be counted against your leave entitlement:

☐ Provided there is no deviation from your anticipated leave schedule, the following number of hours, days, or weeks will be counted against your leave entitlement: _____
(Duration of FMLA Leave – Days or Hours)

☐ Because the leave you will need will be unscheduled, it is not possible to provide the hours, days, or weeks that will be counted against your FMLA entitlement at this time. You have the right to request this information once in a 30-day period (if leave was taken in the 30-day period).

Please be advised:

- **Substitution of Paid Leave –** According to CSU Policy, while on FMLA leave you are required to use your accumulated paid sick and annual leave prior to being placed on leave without pay, as stated in the Academic Faculty/Administrative Professional Manual available at: http://www.facultycouncil.colostate.edu/files/manual/table.html. Paid leave runs concurrently with your unpaid leave entitlement, provided you meet any applicable requirements of the leave policy. Your FMLA entitlement will run concurrently with all paid and unpaid leave time.

- **Medical Recertification –** You ☐ will or ☐ will not be required to furnish additional medical certificates when the condition or leave duration is _more than_ 30 days (i.e. period employee is unable to work continuously or intermittently) as indicated below:
  ☐ Upon expiration of period of incapacity specified on certification.
  ☐ Every 6 months in connection with an absence (may not request recertification every 30 days in connection with an absence.)

- **Fitness for Duty Certificate –** You ☐ will or ☐ will not be required to present written certification from your medical provider of your fitness to resume your employment. If such certification is not timely received, your return to work may be delayed until the required certification is provided. A list of the essential functions of your position ☐ is ☐ is not attached. If attached, the fitness-for-duty certification must address your ability to perform these functions.

Additional information is needed to determine if your FMLA leave request can be approved:

☐ The certification you have provided is not complete and sufficient to determine whether the FMLA applies to your leave request. You must provide the following information no later than _____, (provide at least seven calendar days from the Date of Notification), unless it is not practical under the particular circumstances despite your diligent good faith efforts, or your leave may be denied.
(Specify information needed to make the certification complete and sufficient): _____

☐ Your FMLA Leave request is _Not Approved_.

☐ You have exhausted your FMLA leave entitlement in the applicable 12-month period.

☐ FMLA does not apply to your leave request.

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