OTHER FMLA RESPONSIBILITIES AND INFORMATION

1. When entering leave online, please indicate “FMLA” in the requestor comments section of the absence or timesheet entry request. If you were approved for a Leave of Absence (paid or unpaid LOA), indicate “Approved LOA” in the requestor comments section. It is important that you submit your leave online so you are able to remain in pay status.

2. If you are out on leave for your own serious medical condition, it is agreed that no work will be done until you are released from your doctor and able to return to work.

3. Before returning to work after being out for your own serious medical condition, a return to work slip from your medical provider is required to be given to HR and your supervisor. This is required even if there are no restrictions. **No work can be performed until this is received.**

   a. An evaluation of the restrictions is required to determine if modifications to your duties is possible.
   b. Under FMLA, the employer is reserved the right to a two-day notice before having to allow you back to work.

4. Should the expected beginning and end dates of your leave change, please reach out to Human Resources at 920-424-1166 or hroffice@uwosh.edu.

Notice from the Office of the Provost (For Faculty Members Only)

*Please review policy FAC 3.10. Leaves of Absences as it relates to tenure clock stoppage. Please review the details of your contract obligations and future renewal dates with the Dean of your College. For additional information or questions, you may also contact AVC Faymonville in the Provost Office at faymonvc@uwosh.edu.*

Notice from the Office of Equal Opportunity, Equity and Affirmative Action:

*It is the policy of the University of Wisconsin Oshkosh to provide reasonable accommodations for qualified individuals with a disability who are employees or applicants for employment. UW Oshkosh employees can request reasonable accommodations by contacting the Office of Equal Opportunity, Equity and Affirmative Action or submitting the Reasonable Accommodation Request Form.*