

**Medical Center**  
**Paid Time Off (PTO) and/or Extended Medical Leave Bank (EMLB)**  
**Request Form**

Employee Name: \_\_\_\_\_ Employee Number: \_\_\_\_\_

Manager's Name: \_\_\_\_\_ Manager's Phone #: \_\_\_\_\_

Reason for Request (*initial one*): FMLA \_\_\_\_\_ Leave of Absence \_\_\_\_\_ Military Leave \_\_\_\_\_

Expected Beginning Date of Absence: \_\_\_\_\_ Expected Return Date: \_\_\_\_\_

Please *initial* next to "I DO" or "I DO NOT" as applicable below:

**Military Leave:**

While on Military Leave, I DO \_\_\_\_\_ or I DO NOT \_\_\_\_\_ want to use PTO.

**Disability Insurance:**

After the disability insurance elimination period ends, I DO \_\_\_\_\_ or I DO NOT \_\_\_\_\_ want to use PTO after EMLB is exhausted.

**Disability Insurance Requirements:**

- During the disability insurance elimination period, EMLB usage is required first (if available), then PTO (if available), then leave without pay, in that order.
  - *If EMLB becomes exhausted during the elimination period, and PTO is available, employees will be required to use PTO during the elimination period. If both EMLB and PTO are exhausted prior to or during the elimination period, employees will be required to take leave without pay.*
- All EMLB hours must be exhausted prior to receiving payment from the Short Term Disability benefit or PTO usage (this includes during and after the elimination period of the benefit).
- Once the elimination period is complete, and EMLB is exhausted (if applicable), PTO will automatically be used from any available balance to supplement disability payments, unless employee requests they do not want to use PTO.
- Any employee who is eligible, but does not elect to file for disability insurance will be required to use EMLB (if available) until exhausted; then use PTO (if available), until either the employee returns to work or until PTO hours are exhausted, whichever occurs first.
- I understand that the type of pay requested will be paid out until exhausted or I return to work.
- I understand that I cannot receive PTO and/or EMLB that would increase my base rate of pay, or, that exceeds my weekly work commitment.
- I understand if my absence is related to military leave, I am not required to use PTO.
- I understand if the type of leave is related to FML or Leave of Absence, but I am not eligible for disability insurance, I am required to use PTO until it is either exhausted or I return to work. *This does not include bereavement leave.*

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

Please return completed form to Employee Health & Wellness ([employeehealth@gru.edu](mailto:employeehealth@gru.edu)) and  
provide a copy to your manager/timekeeper and Payroll ([MCGHI\\_Payroll@gru.edu](mailto:MCGHI_Payroll@gru.edu)).