

Information to send to FMLA & Leave Specialist when referring an employee for FMLA

Employee ID

Employee Name – Last

Employee Name – First

Employee's State of Residence

FMLA for Self, Family, or Unknown

Date FMLA event will begin, if known

Requested FMLA in the 12-mo prior to requesting FMLA? (Y,N)

Department ID

Department Name

HR Liaison First and Last Name

Timekeeper First and Last Name

Employee's preferred contact method (phone, email, teams)

Any additional things I need to know to best assist the employee