

Overview

Boston Medical Center (BMC) recognizes that certain conditions and circumstances may arise to cause an employee to request time off from work. To address this issue, BMC grants leaves of absences (LOA) for certain personal, medical, or citizenship responsibilities. These leaves must balance the operational needs of BMC with the needs of the employees, and follow all applicable federal and state laws.

Note: Be sure to read the policy on the leave you are approved for to fully understand the terms of the leave. Not all leaves guarantee your job upon return. If you are a represented employee, please refer to your Collective Bargaining Agreement.

BMC Offers the Following Leaves of Absence

- [Family and Medical Leave \(FMLA\)](#)
- Medical Leave (non-FMLA)
- [Massachusetts Parental Leave](#)
- [Military Medical Leave](#)
- [Military Qualifying Exigency](#)
- Military Deployment/Active Duty
- Military Activation (Voluntary or Involuntary)*
- [Americans with Disabilities Act Leave](#)
- [Small Necessities Leave](#)
- Domestic Violence Leave

When to Apply

The general rule is that you must apply for a Leave of Absence 30-days prior to the beginning of your requested leave date. Exceptions to this rule are made for unexpected events such as emergency surgery or illness. In those situations, you must notify your manager as soon as possible of the need for a leave and follow the application process below.

How to Apply

For all leaves, employees must submit a completed Request for Leave of Absence Form and documentation supporting the need for the leave.

Request for a Leave of Absence Form

- **First Day out of Work:** On the form you should put the first day you were not able to work your scheduled shift (not the date of illness or injury).
- **Last Day out of Work:** This is the date of the last shift you are unable to work, not the day of your return. If the last day out is unknown, such as due to an

ongoing health condition, you may put in the date of your next follow-up doctor's appointment.

- **Signatures:** both you and your manager need to sign the form. Your manager's signature only verifies that they have received the request, not that your leave has been approved.

Request for a Leave of Absence Form

The required documentation depends on which leave you are taking. Please refer to the table below.

How to Submit

The Request Form and Required Documentation may be:

- emailed to *******@***.org**
- securely faxed to *****-***-******

Leave	For	Required Documentation	Give to
Medical Leave <ul style="list-style-type: none"> • FMLA • MMLA • Worker's Compensation 	Your own serious health condition	Request for Leave of Absence Form & Certification of Health Care Provider Form	Absence Management Department
Medical Leave <ul style="list-style-type: none"> • FMLA 	A family member's serious health condition	Request for Leave of Absence Form & Certification of Health Care Provider Form	Absence Management Department
Military Medical Leave <ul style="list-style-type: none"> • FMLA 	Yourself, or family member	Request for Leave of Absence Form & Certification for Covered Service Member Form	Absence Management Department
Military Qualifying Exigency	Support for a covered service member	Request for Leave of Absence Form & Certification of Qualifying Exigency Form	Absence Management Department
Military Deployment/Active Duty	Yourself	Request for Leave of Absence Form Official Military Orders	Absence Management Department and your Manager
Military Activation	Yourself	Official Military Orders *This is not treated as a Leave of Absence so only a copy of the orders is required.	Absence Management Department and your Manager

Americans with Disabilities Act	Yourself	Request for Leave of Absence Form	Absence Management Department
Small Necessities Act	Your child or elderly relative	Small Necessities Act Request Form	Your Manager
Domestic Violence Leave	Yourself or family member	Domestic Violence Act Form Third Party documentation	Absence Management Department