



Hospital Sisters
HEALTH SYSTEM

Request to Reserve Paid Time Off (PTO) with Family Medical Leave

While on an approved Family Medical Leave (FML) colleagues with 40 or less hours of PTO may elect to reserve these hours and go unpaid for the approved leave.

I wish to reserve _____ hours of PTO during my approved Family Medical Leave.

I understand that this request is dependent upon approval of my Family Medical Leave by Unum.

I further understand that I will be responsible for making payments for my insurance premiums, if applicable, for pay periods in which I do not have sufficient earnings to cover these deductions.

Signature

Date

Printed Name

Colleague ID#

Please return this form to:

HSBS Colleague Service Center

Fax: 217-492-5896

Email: Leave@hshs.org

Or by mail:

PO Box 19456

Springfield, IL 62794-9456