

**Sample Letter 6 – Employee FML Eligible
(For Qualifying Exigency Leave)**

[Date]

[Employee Name]

[Employee Address]

Dear [Employee Name]:

In response to your request for a leave of absence to deal with one or more qualifying exigencies, we are providing you with information pertaining to the University's Family and Medical Leave (FML) policy. Enclosed are several forms:

- Leave of Absence Request
- Notice of Eligibility and Rights & Responsibilities
- Certification for Qualifying Exigency Leave

Part A of the Notice of Eligibility and Rights & Responsibilities indicates that you are eligible for FML. Part B provides information about whether you are able or required to substitute paid leave for unpaid leave and any responsibilities you may have while on leave. Please read this Notice carefully.

Please complete the employee section of the Leave of Absence Request and the enclosed Certification. All forms to be completed should be returned to _____ within 15 calendar days of this request. Failure to provide the required documentation may result in delay or denial of leave.

If you have any questions, please let me know.

Sincerely,

[Name]

Cc: Benefits
[ER/LR/HR, as applicable]

Enclosures: Leave of Absence Request
Notice of Eligibility and Rights & Responsibilities
Certification for Qualifying Exigency Leave