INDIAN AFFAIRS
DIRECTIVES TRANSMITTAL SHEET
(modified DI-416)

<table>
<thead>
<tr>
<th>DOCUMENT IDENTIFICATION NUMBER</th>
<th>SUBJECT</th>
<th>RELEASE NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>28 IAM-H</td>
<td>Attendance and Leave</td>
<td>07-07</td>
</tr>
<tr>
<td>FOR FURTHER INFORMATION</td>
<td>Handbook</td>
<td></td>
</tr>
<tr>
<td>Office of Human Resources</td>
<td></td>
<td>DATE</td>
</tr>
</tbody>
</table>

EXPLANATION OF MATERIAL TRANSMITTED:

This Handbook is to assist employees, supervisors and managers, and human resources specialists in carrying out responsibilities with respect to attendance and leave administration.

Grayford Payne
Acting Deputy Assistant Secretary - Management

FILING INSTRUCTIONS:

Remove: None

Insert: 28 IAM-H
# Table of Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Introduction</strong></td>
<td></td>
</tr>
<tr>
<td>1. What is the Purpose of this Handbook?</td>
<td>7</td>
</tr>
<tr>
<td>2. What if this Handbook Conflicts With a Negotiated Agreement?</td>
<td>7</td>
</tr>
<tr>
<td><strong>Chapter 1 Work Schedules</strong></td>
<td></td>
</tr>
<tr>
<td>1. What is the Workweek?</td>
<td>8</td>
</tr>
<tr>
<td>2. Who Can Approve a Change to a Work Schedule?</td>
<td>8</td>
</tr>
<tr>
<td>3. What is an Alternative Work Schedule?</td>
<td>8</td>
</tr>
<tr>
<td>4. What are the Alternative Work Schedules?</td>
<td>9</td>
</tr>
<tr>
<td>5. What are the Core Hour Requirements?</td>
<td>11</td>
</tr>
<tr>
<td>6. What is the Length of the Workday?</td>
<td>11</td>
</tr>
<tr>
<td>7. How Long is the Meal Time?</td>
<td>12</td>
</tr>
<tr>
<td>8. Are There Restrictions on Selecting an AWS Day Off?</td>
<td>12</td>
</tr>
<tr>
<td>9. How are Credit Hours Earned and Used?</td>
<td>12</td>
</tr>
<tr>
<td>11. What if the Office is Closed Due to Inclement Weather or an Administrative Action?</td>
<td>14</td>
</tr>
<tr>
<td>12. Are Changes to an AWS Required to Accommodate Travel, Conferences, or Training?</td>
<td>14</td>
</tr>
<tr>
<td>13. What if a Supervisor Requires an Employee to Work Overtime or Earn Compensatory Time in Lieu of Overtime?</td>
<td>14</td>
</tr>
<tr>
<td>15. How is an AWS Established and Maintained?</td>
<td>15</td>
</tr>
<tr>
<td>16. Can an AWS Agreement be Modified or Cancelled?</td>
<td>16</td>
</tr>
<tr>
<td>17. How are AWS Agreements Maintained?</td>
<td>16</td>
</tr>
</tbody>
</table>
Chapter 2  Holidays
1. What are the Federal Holidays? 17
2. Does the IA Observe State and Local Holidays? 17

Chapter 3  Group Dismissals or Closure in Emergency Situations
1. When is Group Dismissal or Closure Appropriate? 18
2. What is the Procedure for Emergency Dismissal or Closure? 18
3. What Happens When the Media Announces, "Federal Government Closed?" 18
4. Are Public Protest Events Non-Workdays? 19

Chapter 4  General Leave Provisions
1. Who Has the Authority to Approve Leave? 20
2. Can Annual Leave be Substituted for Sick Leave and Vice Versa? 20
3. What is the Minimum Charge to Employee Leave Accounts? 20
4. Do Intermittent or Temporary Employees Earn Leave? 20
5. What is the Time Limit for Using Compensatory Time? 21
6. What is the Leave Policy for Emergency Situations? 21
7. What Is Absence Without Leave (AWOL)? 21

Chapter 5  Annual Leave
1. What is Annual Leave and Who is Eligible to Earn it? 22
2. How Much Annual Leave Do Employees Earn? 22
3. What is the Annual Leave Ceiling? 23
4. How is Annual Leave Requested? 23
5. What Happens to Annual Leave When an Employee Separates from the Federal Government? 23
6. Can Annual Leave be Advanced? 24
7. How is Advanced Annual Leave Debt Liquidated When an Employee Leaves? 24

Chapter 6 Restoration of Forfeited Annual Leave
1. Can Forfeited Annual Leave Be Restored? 25
2. What Constitutes an "Exigency" of the Public Business? 25
3. What are the Criteria for Restoring Forfeited Leave? 25
4. What is the Procedure for Processing a Request for the Restoration of Leave? 26
5. What Happens to a Request for Restored Leave After it is Approved? 26
6. What is the Time Limit for Using Restored Annual Leave? 26

Chapter 7 Sick Leave
1. How Much Sick Leave Do Employees Earn? 28
2. When May Sick Leave Be Approved? 28
3. What is “Sick Leave for Family Care or Bereavement Purposes,” “Sick Leave to Care for a Family Member with a Serious Health Condition,” and “Family and Medical Leave”? 29
4. How Much Sick Leave May be Used for a Family Member? 30
5. How is Sick Leave Requested? 31
6. What is a Medical Certificate and When is One Required? 31
7. What Happens if an Employee Abuses Sick Leave Privileges? 31
8. Can Sick Leave be Advanced? 32
9. How is Advanced Sick Leave Liquidated if an Employee Leaves? 32
10. If I Return to Federal Service What Happens to Previously Earned Sick Leave? 32
11. Can Sick Leave be Used to Compute a Retirement Annuity? 33
Chapter 8  Family and Medical Leave Act of 1993 (FMLA)
1. Who is Eligible for FMLA Leave? 34
2. What Happens if the Supervisor Questions an Employee’s Medical Certification? 37
3. Can Paid Leave be Substituted for FMLA Leave? 37
4. Can Employees Work Part-Time and Use FMLA Leave? 38
5. Is There an Entitlement to the Same Position Upon Returning to Work? 38

Chapter 9  Voluntary Leave Transfer Program
1. What is the Voluntary Leave Transfer Program? 39
2. How Does an Employee Become a Leave Transfer Recipient? 40
3. Who is a Leave Donor? 43
4. What Happens to Any Unused Donated Annual Leave? 44

Chapter 10  Other Paid Leave
1. What is Other Paid Leave? 45
2. Who is Eligible for Military Leave? 45
3. Who is Eligible for Funeral Leave? 46
4. Who is Eligible for Court Leave? 46
5. Who is Eligible for Bone-Marrow or Organ Donor Leave? 47
6. When May an Employee be Granted Excused Absence? 47

Chapter 11  Leave Without Pay (LWOP)
1. What is LWOP? 50
2. What is Extended LWOP and the Procedure for Requesting It? 51
Appendix

A - IA Alternative Work Schedules - Comparison of Options
B - IA Sample Schedules - Compressed and Maxiflex
C - IA Flexitime (Gliding Schedule) Work Schedule Agreement
D - IA Maxiflex Work Schedule Agreement
E - IA Compressed Work Schedule Agreement
F - OPM Form 71, “Request for Leave or Approved Absence”
G - Application for Restoration of Annual Leave
H - Form OPM 630, “Application to Become a Leave Recipient Under the Voluntary Leave Transfer Program”
I - Form OPM 630-A, “Request to Donate Annual Leave to Leave Recipient Under the Voluntary Leave Transfer Program” (Within Agency)
J - Form OPM 630-B, “Request to Donate Annual Leave to Leave Recipient Under the Voluntary Leave Transfer Program” (Outside Agency)
K - U.S. Department of Labor Form WH-380, "Certification of Health Care Provider (Family and Medical Leave Act of 1993)"
Introduction

1. **What is the Purpose of this Handbook?**

   This handbook establishes how hours of work may be assigned and managed and provides guidelines for granting and excusing leave uniformly and equitably. This handbook applies to all Indian Affairs (IA) employees covered under title 5 leave provisions and is based upon U.S. Office of Personnel Management guidance.

2. **What if this Handbook Conflicts With a Negotiated Agreement?**

   To the extent that this handbook conflicts with a negotiated agreement, the negotiated agreement will prevail for bargaining unit employees.
Chapter 1

Work Schedules

1. What is the Workweek?

The administrative workweek begins on Sunday and ends on the following Saturday. The basic workweek for full-time employees is generally 40 hours, 8 hours each on Monday through Friday, exclusive of an uncompensated lunch period of 30 minutes. Supervisors will prescribe specific days and hours of duty for part-time employees.

2. Who Can Approve a Change to a Work Schedule?

Supervisors can approve changes to an employee’s work schedule.

a. What Circumstances Will Permit a Change?

(1) Work requiring special hours of duty for particular employees or groups of employees;

(2) Individual hardships; or

(3) Approved training courses.

Supervisors may periodically reevaluate changes to the work schedule to keep individual deviations from normal business hours at a minimum and to ensure that work is accomplished efficiently.

3. What is an Alternative Work Schedule?

An alternative work schedule (AWS) is any one of several available work schedules other than the standard fixed work schedule of 8 hours per day, 40 hours per week. By allowing employees to vary the hours of their workday and/or workweek, AWS offers employees maximum flexibility, yet ensures office coverage as most forms of AWS require employees to either work, or account for absences with approved leave, during the designated core hours.

There are multiple options designed to meet both management and accommodate employee needs. The system’s flexibility can improve not only the quality of our customer service, but also the personal lives of employees. However, the individual choices available to employees are privileges, not entitlements. No employee has an inherent right to a
particular work schedule. A chart that compares the features of each option is provided in Appendix A. Sample Schedules are shown in Appendix B. An AWS agreement is required for participation. Sample Agreements are provided as Appendices C, D, and E.

a. **What are the Benefits of AWS?**

The AWS program enables supervisors to meet their program goals while simultaneously allowing employees greater flexibility in scheduling their personal activities. As employees gain greater control over their time, they may balance work and family responsibilities more easily, become involved in volunteer activities, and take advantage of educational opportunities. An AWS can also reduce the use of both scheduled and unscheduled leave for personal appointments. The benefits of AWS for the organization include increased employee morale, a greater window for coast-to-coast communications, and its use as a recruitment and retention tool.

b. **Who is Eligible for AWS?**

Subject to approval of the immediate supervisor, all IA employees (excluding intermittent employees) may be eligible to participate in some form of AWS in accordance with the provisions of this Handbook and the Indian Affairs Alternative Work Schedule policy. Supervisors are encouraged to work with individual employees to afford them maximum flexibility in scheduling their work while maintaining office coverage and achieving performance results.

4. **What are the Alternate Work Schedules?**

Alternate work schedules fall into two categories: flexible work schedules (FWS) and compressed work schedules (CWS).

A CWS has fixed hours with a fixed starting and ending time, and allows employees to work their scheduled hours in fewer than 10 workdays. Credit hours cannot be earned under a CWS. There are no core hours, flexible time bands, or flexible lunch periods.

Employees may elect to work one of the following alternate work schedules:

a. **Flexible Work Schedules:** An FWS allows variable hours (within designated flexible time bands) and variable days, with set core hours. Employees, with the exception of members of the Senior Executive Service, may earn credit hours under an FWS.
Flexitime – commonly referred to as the “gliding schedule,” this type of AWS provides for flexible arrival, departure and lunch periods and has specified core hours in each of ten workdays in the pay period. Full-time employees are required to work during their scheduled work hours, or use leave, credit time, and/or compensatory time off during specified core hours and eight regular hours on each of ten workdays in the bi-weekly pay period. Employees may be allowed to earn credit hours under the guidelines in this policy after the bi-weekly work requirement is met.

Maxiflex – this type of AWS allows for the establishment of flexible arrival and departure times, and flexible lunch periods and requires that specific core hours be established on at least three days of the work week. There is no daily or weekly requirement. Employees must work or account for their whereabouts, by leave, credit time, or compensatory time off, to meet their bi-weekly work requirement (80 hours for full-time employees). Employees may vary the number of hours they work each day and each week for a maximum of two days off per pay period. Employees working under this type of AWS should gain approval from their immediate supervisor for their “planned” schedule by the beginning of each pay period. Credit hours may be earned with supervisory approval, but will not accrue until after the biweekly work requirement is met. In addition to full Maxiflex, employees have the option of working schedules similar to those under a compressed schedule as follows:

Maxiflex 5/4-9 – requires the employee to establish a daily schedule of nine hours on each of eight work days, eight hours on one work day and one AWS day off per pay period. The AWS day off is established but may be “swapped” for another day within a pay period, with prior supervisory approval. Arrival and departure time bands and core hours are established for days on which work is scheduled. Flexible lunch periods are allowed, with prior supervisory approval. Credit hours may be earned, but will not accrue until after the bi-weekly work requirement has been met.

Maxiflex 4/10 – requires the employee to establish a daily schedule of ten hours on each of four workdays each week with one AWS day off per week. The AWS day off is scheduled on a recurring basis, but may be “swapped” for another day within a pay period, with prior supervisory approval. Arrival and departure time bands and core hours are established for days on which work is scheduled. Flexible lunch periods are allowed with prior supervisory approval. Credit hours may be earned, but will not accrue until the bi-weekly work requirement has been met.

b. Compressed Work Schedules: A CWS has fixed hours with a fixed starting and
ending time, and allows employees to work their scheduled hours in fewer than 10 workdays. Credit hours cannot be earned under a CWS. There are no core hours, flexible time bands, or flexible lunch periods.

(1) **Compressed 5/4-9** -- under this schedule, employees work nine hours on eight workdays in the pay period, eight hours on one day in the pay period and have one AWS day off. The AWS day off is fixed at the time the schedule is established and may not be “swapped” for another day.

(2) **Compressed 4/10** – under this schedule, employees work four ten-hour days each week of the biweekly pay period and have one AWS day off each week. The AWS day off is fixed at the time the schedule is established and may not be “swapped” for another day.

Sample schedules are shown in Appendix B.

5. **What are the Core Hour Requirements?**

Core hours are that part of the schedule of hours during the workday, workweek, or pay period that is within the tour of duty and during which employees **must** be present at work or on leave, or other excused absence. The core hours are 9:00 a.m. to 3:30 p.m., with a break of either ½ or one hour mid-day for lunch.

Employees must be present at work during core hours, except for their scheduled ½ to one hour lunch break, or must account for absent time with credit hours, compensatory time off, or appropriate charge to leave, or other excused absence.

Supervisors may require employees to be present at work at times other than those covered by core hours to attend meetings, training, or perform other assignments as may be necessary. If so required, employees must report. If the requirement results in additional entitlement to pay such as night differential or overtime, the supervisor must compensate the employee in accordance with appropriate regulations.

6. **What is the Length of the Workday?**

The maximum length of the workday is generally 12 hours; however, exceptions may be made as needed.

Supervisors should establish the earliest arrival time and the latest departure time for employees, taking into consideration the operational hours of the facility in which they work. Supervisors should consider the safety and security of employees when establishing these times. In locations protected by a guard force, supervisors must coordinate arrival and departure times that do not result in additional expenses for extended guard hours.
7. **How Long is the Meal Time?**

Meal time or an unpaid break of no less than 30 minutes and no more than one hour is required for each 6 hours or longer of work, and must be scheduled to be taken between 11:00 am and 2:00 pm. **The meal time or unpaid break may not be taken at the beginning or end of the normal scheduled workday.** Unless provided for in a labor agreement, an employee has no entitlement to a paid break during work hours. Employees must work the number of hours appropriate to their work schedule.

For example, an employee on an 8-hour schedule who arrives for work at 7:00 a.m. and who has a 30-minute meal or unpaid break between the hours of 11:00 a.m. and 2:00 p.m., is due to leave for the day at 3:30 p.m. If that same employee has a one-hour meal break, his/her workday will end at 4:00 p.m.

a. **Can the Meal Time be Skipped to Leave Work Early?**

   No – The purpose of a Meal Time is to provide a duty-free period to have a meal break.

8. **Are There Restrictions on Selecting an AWS Day Off?**

Supervisors should determine which AWS days off are appropriate in order to ensure the needs of the office are met.

9. **How are Credit Hours Earned and Used?**

Credit hours are hours an employee works voluntarily, with prior supervisory approval, in excess of the normal hours worked in a pay period. Credit hours can be carried over for use in another pay period.

Supervisory approval is required to earn and use credit hours. “Blanket” approval for an employee to earn credit hours may be given at the supervisor’s discretion; however, such deviations should be an exception. Credit hours may not be earned on Saturdays, Sundays, or holidays.

Credit hours may be earned on regular workdays or on the employee’s AWS day off as long as no more than 12 total hours are worked on any day. Therefore, employees working an 8-hour schedule may work up to four extra hours per day; those on a 9-hour schedule may work up to three extra hours per day, and those on a 10-hour schedule may work up to two extra hours per day. Once the employee has completed 80 hours in a pay period (or less for a part-time employee), additional hours worked will be considered and input into the Department's automated timekeeping system, Quicktime, as credit hours. Extra hours worked in the pay period will not be recorded as credit hours until such time as the
employee has met the 80-hour bi-weekly requirement.

Part time employees on Maxiflex must work the number of hours specified in their tour of duty for the pay period before they may accrue credit hours. Part time employees in Flexitime must work 80 regular hours prior to being able to earn credit hours. Hours an employee works in addition to their normal tour of duty for the pay period up to 80 hours will be paid at the regular hourly rate.

Credit hours must be earned within the time period established for the length of the workday, e.g., between the hours of 6:30 a.m. and 7:30 p.m. for Main Interior employees.

Credit hours may be earned in 15-minute increments. Members of the Senior Executive Service are prohibited from accruing credit hours under an AWS. (See 5 CFR § 610.408)

Full time employees may only carry over a maximum of 24 credit hours from one pay period to the next. Part time employees may only carry over a maximum number of credit hours equal to ¼ of their regular bi-weekly work requirement. Employees are responsible for monitoring their credit hour balance and ensuring that the maximum carry over is not exceeded. Credit hours in excess of 24 hours are forfeited and do not entitle the employee to overtime compensation. “Off the record” balances are not allowed.

a. What Happens to Credit Hours When Switching from an FWS to a CWS?
Credit hours may not be earned or used by employees working under a compressed schedule. Employees who wish to establish a compressed work schedule must use all of their existing credit hours prior to doing so.

10. How Do Holidays Impact an AWS?

Employees working under a compressed work schedule will be paid the number of hours for which they were scheduled to work on the holiday. For example, an employee who works a compressed 4/10 schedule will receive 10 hours of holiday pay. If the holiday falls on the AWS day off and that day is a Monday, the employee will be scheduled to take Tuesday off in lieu of the holiday and will be paid the number of hours they are scheduled to work on that day. If the holiday falls on an AWS day off and that day is a Friday, the employee will be scheduled to take Thursday off in lieu of the holiday and will be paid the number of hours they are scheduled to work on that day.

Full-time employees working under a flexible work schedule shall receive only 8 hours holiday pay for holidays. Under a flexible work schedule, if the AWS day off is the same day as the holiday, the employee and supervisor will determine which day within the same pay period will be taken as the AWS day off, but generally the employee will be scheduled to take Tuesday as their AWS day off if the holiday falls on a Monday, and Thursday as
their AWS day off if the holiday falls on a Friday.

11. **What if the Office is Closed Due to Inclement Weather or an Administrative Action?**

When employees have reported to work and are granted administrative leave for early dismissal:

- All employees will receive either the number of hours granted, such as two hours granted by the Secretary of the Interior as a reward, or the number of hours left until the end of the employee's scheduled work shift, WHICHEVER IS LESS. An employee who is unable to take advantage of an early dismissal granted by management is NOT entitled to take corresponding administrative leave on another day.

When employees are not required to report to work and administrative leave is granted for the entire day (such as for inclement weather):

- Employees on an established schedule (Flexitime, Compressed, Maxiflex 5/4-9 and Maxiflex 4/10) will be excused for the number of hours for which they were scheduled to work on that day. If not scheduled to work at all on that day, the employee CANNOT be granted another workday off.

- Employees who are working a full Maxiflex schedule will be excused for eight (8) hours.

12. **Are Changes to an AWS Required to Accommodate Travel, Conferences, or Training?**

In cases where the training, travel, conference, or temporary assignments do not conflict with the normal work schedule, no change is necessary. Employees must work with their supervisors to amend their schedule as needed to attend conferences, training, and report for temporary duty assignments away from the regular duty station. The amendment need not require the employee to revert to a normal 8-hour a day schedule, but may require switching the AWS day, or in the case of an employee working a 4/10 schedule, the employee may be required to work the 4/10 one week of the pay period and revert to five (5) eight-hour days for the week of training, travel or the conference.

13. **What if a Supervisor Requires an Employee to Work Overtime or Earn Compensatory Time in Lieu of Overtime?**

Additional hours of work ordered by a supervisor, including work an employee is directed
to perform on his or her AWS day off, are subject to the provisions of the overtime regulations. Overtime entitlements are in accordance with applicable provisions of law and regulations. There is no basis for IA to pay overtime to exempt employees if it is not officially ordered in advance.

Non-exempt employees must be paid overtime pay when required to work overtime hours unless they request compensatory time instead. Exempt employees required to work overtime may be required to earn compensatory time instead of receiving overtime pay. Overtime hours of work are both: 1) officially ordered in advance; and 2) in excess of 8 hours in a day or 40 hours in a week for employees working a standard work schedule, or in excess of 80 hours in a pay period for those on alternate work schedule.

Credit hours are not a tool by which management can circumvent the obligation for proper overtime compensation.


Night differential does not accrue for work performed after 6:00 p.m. or prior to 6:00 a.m. under an AWS schedule because at least eight (8) hours of work was available during the regular workday, and the employee chose to perform the work at these times.

15. How is an AWS Established and Maintained?

Employees must complete an AWS agreement (see Appendices C, D, and E) and submit it to their supervisor for approval. Supervisors should discuss the proposed schedule and either approve it or amend it with the employee within 10 days of receipt.

Supervisors should ensure that any schedules they approve will allow for necessary office coverage and “back up” coverage, when necessary. Supervisors should establish a fair and equitable method for resolving schedule conflicts.

With AWS, greater responsibility is placed on both the supervisor and the employee for scheduling, recording, and monitoring arrival and departure times. It is highly recommended that sign-in/sign-out logs are used to record arrival and departure times of all employees in offices that implement the flexible work schedules. In addition, employees are required to keep track of and record the beginning and ending time of each day's work in the Department's automated timekeeping system, Quicktime. This can occur on a daily basis or the beginning and ending time of each day's work can be recorded on the employee’s calendar and entered at one or more times during the pay period. Quicktime should also be used to record absences from the office during the day. For example, the employee should record his/her use of approved leave during the normal work day.

Supervisors and managers will also use Quicktime to approve timecards. Employees and
supervisors should use Quicktime for processing leave requests. Certification of the
timecard in the Quicktime system signifies that the supervisor acknowledges the
employee’s time as input is accurate and correct. All employees, managers, and
supervisors are reminded to keep passwords confidential and not share them with anyone.
Paper timecard systems are not acceptable.

When there are changes to an employee’s Maxiflex schedule from one pay period to the
next, employees must notify their supervisors of their planned work schedule prior to the
beginning of the pay period.

16. **Can an AWS Agreement be Modified or Cancelled?**

The supervisor has the discretion to restrict or cancel the AWS arrangement if
organizational effectiveness, productivity, efficiency, or individual performance is
negatively impacted. Supervisors should notify employees in writing of their intent to
restrict or cancel an AWS agreement and indicate the reasons for doing so and the effective
date of the action.

Supervisors may require employees to make temporary changes to their schedule to meet
deadlines, accommodate long-term employee absence, attend meetings or conferences,
accommodate the effects of vacant positions during the recruitment process, etc.

Safety and security regulations and position requirements may require permanent
exemption or restrictions such as limiting the employee to one AWS day off a pay period,
modifying the arrival and departure time bands, or requiring that all members of a field
crew work the same schedule, etc. Supervisors should apply such restrictions consistently
within the work unit. Permanent restrictions and exemption must be approved at the next
higher level of supervision.

Employees who are placed on leave restriction or a performance improvement plan (PIP)
may be excluded from all or some of the alternative work schedules during the period of
the leave restriction or PIP, as deemed necessary by the supervisor.

An employee can request a change to or cancellation of an AWS agreement at any time by
completing another AWS Agreement.

17. **How are AWS Agreements Maintained?**

Supervisors should retain the original copy of the signed AWS agreement and provide a
copy to the employee and the employee’s timekeeper.

Upon receipt of an approved AWS agreement, timekeepers should follow the established
local procedures for processing the information in the timekeeping and payroll systems.
Chapter 2

Holidays

1. What are the Federal Holidays?

   a. The holidays for Federal employees are:

      • New Year’s Day (January 1)
      • Martin Luther King, Jr.’s Birthday (Third Monday in January)
      • Washington’s Birthday (Third Monday in February)
      • Memorial Day (Last Monday in May)
      • Independence Day (July 4)
      • Labor Day (First Monday in September)
      • Columbus Day (Second Monday in October)
      • Veterans Day (November 11)
      • Thanksgiving Day (Fourth Thursday in November)
      • Christmas Day (December 25)

   b. Presidential Inauguration Day:

      Federal employees in the Washington, DC, area are entitled to a holiday on the day a President is inaugurated (January 20th following a Presidential election). Employees are entitled to this holiday if they are employed in the District of Columbia, Montgomery and Prince Georges Counties in Maryland, Arlington and Fairfax Counties in Virginia, and the cities of Alexandria and Falls Church in Virginia.

      When Inauguration Day is moved to January 21st because January 20th falls on Sunday, Federal employees in the Washington, DC, area who would otherwise work on Monday, January 21st, are entitled to a holiday on that day.

2. Does the IA Observe State and Local Holidays?

   The IA treats State and local holidays as regular workdays. If an employee wishes to be absent and the office is open, he or she must request annual leave or leave without pay from the supervisor.

   In those rare situations where a non-Federal holiday makes it impossible to properly perform the functions of the office, either the Director or Deputy Director and heads of field offices may close IA field offices.
Chapter 3

Group Dismissals or Closure
In Emergency Situations

1. When is Group Dismissal or Closure Appropriate?

Group dismissal may be necessary when normal operations are interrupted by events or emergencies beyond the control of the office or employees, such as severe inclement weather; natural disasters; power failure; a major fire; serious interruptions to public transportation; mass demonstrations; and other situations which affect the health and safety of employees and/or prevents employees from working or reporting to work.

a. Who in the Department of the Interior Can Close Offices in the Washington, DC Metropolitan Area?

The Director, Office of Human Resources, Department of Interior, may close all or part of Washington, DC metropolitan area offices when conditions warrant.

b. Who Can Close a Field Office?

Regional Directors have the authority to close a field office due to emergency conditions.

2. What is the Procedure for Emergency Dismissal or Closure?

The Office of Personnel Management (OPM) has developed guidelines for the dismissal and closure of Federal agencies in the Washington, DC area.

Employees in the Washington, DC area may call the Department of the Interior employee information hotline at 202-208-6606, or check the “Operating Status” section of the OPM homepage at: www.opm.gov.

Employees who work outside the Washington, DC metropolitan area should follow procedures issued by their Federal Executive Board or local police authorities.

3. What Happens When the Media Announces, “Federal Government Closed?”

Non-emergency employees (including employees on pre-approved leave) will be granted excused absence for the number of hours they were scheduled to work. This does not apply to employees on leave without pay, workers’ compensation, suspension, or in any other non-pay status. Telework employees may be expected to work from their telework
sites, as specified in their telework agreements. Employees on alternative work schedules are not entitled to another AWS day off in lieu of the workday when the agency is closed.

4. **Are Public Protest Events Non-Workdays?**

No. When a private group designates a day for discussions, protests, or non-work, there is no effect on Federal Government agencies. Such days are regular workdays and regular leave policies are in effect. Supervisors may deny a request for leave if the employee’s absence would adversely affect the operation of the office.
Chapter 4

General Leave Provisions

1. Who Has the Authority to Approve Leave?

   a. First-line supervisors may approve all leave requests except for leave without pay (LWOP) in excess of 30 calendar days and requests for the restoration of forfeited annual leave.

   b. LWOP in excess of 30 calendar days may only be approved by the employee’s second-level supervisor or his/her designee. Requests for the restoration of forfeited annual leave are approved by the appropriate Bureau Director.

2. Can Annual Leave be Substituted for Sick Leave and Vice Versa?

   Annual leave can be used in lieu of sick leave. Employees may also retroactively substitute annual leave for sick leave to liquidate an outstanding advanced sick leave balance.

   If an employee is on annual leave, sick leave may be requested in lieu of annual if a matter arises that would normally allow the employee to take sick leave under the sick leave provisions, such as for illness or bereavement purposes.

3. What is the Minimum Charge to Employee Leave Accounts?

   Leave is charged in increments of 15 minutes.

4. Do Intermittent or Temporary Employees Earn Leave?

   Employees on an intermittent work schedule do not earn annual or sick leave.

   Temporary employees on an initial appointment of less than 90 days do not earn annual leave. However, if the appointment is extended or the employee receives one or more successive temporary appointments without a break in service, the employee becomes eligible to accrue annual leave on the 90th day of employment, and in addition, the employee is entitled to the annual leave that would have accrued during the initial 90-day period. Temporary employees also earn 4 hours of sick leave in each biweekly pay period of the appointment.
5. What is the Time Limit for Using Compensatory Time?

a. Exempt Employees:

Employees who are not covered by the Fair Labor Standards Act (exempt) must use their compensatory time within 26 pay periods after the pay period it was credited. If it is not taken within this period of time, the employee loses the right to compensatory time off and to overtime pay unless the failure to use it is the result of an exigency of the service beyond the employee’s control, an administrative error, or sickness or injury that prevents the employee from taking the scheduled compensatory time off. In this case, the compensatory time off may be restored.

If the employee separates or goes on extended leave without pay to perform service in one of the uniformed services or because of an on-the-job injury with entitlement to injury compensation under 5 U.S.C. Chapter 81, he or she is entitled to receive pay for the overtime work at the overtime rate in effect for the period during which the compensatory time was earned.

b. Non-exempt employees:

Employees who are covered by the Fair Labor Standards Act (non-exempt) must use any compensatory time within 26 pay periods after the pay period it was credited. If the compensatory time off is not taken within this time period, or if the employee separates, or goes on extended leave without pay to perform service in one of the uniformed services or because of an on-the-job injury with entitlement to injury compensation under 5 U.S.C. Chapter 81, he or she is entitled to receive pay for the overtime work at the overtime rate in effect for the period during which the compensatory time was earned.

6. What is the Leave Policy for Emergency Situations?

Supervisors will commonly follow the guidelines outlined by US OPM. However, employees should consult with their supervisors in emergency situations.

7. What is Absence Without Leave (AWOL)?

AWOL is an unpaid absence from duty which is not approved, or for which a leave request has been denied. Although AWOL is not a disciplinary action, it may be used as a basis for initiating a disciplinary action against an employee.
Chapter 5
Annual Leave

1. **What is Annual Leave and Who is Eligible to Earn it?**

   Annual leave is an approved absence from work with pay and may be requested for any absence.

   Unless an employee is on an intermittent work schedule or an initial temporary appointment of less than 90 days, the employee is eligible to earn and use annual leave.

2. **How Much Annual Leave Do Employees Earn?**

   Members of the Senior Executive Service (SES), or employees in a senior level (SL), or scientific or professional position (ST), accrue 8 hours of annual leave each full pay period.

   Employees not in any of the above positions earn annual leave each full pay period they are in a pay status based on years of service. The earning rate changes the pay period after the 3rd and 15th year of employment is completed. The following table shows how much leave is earned each pay period:

<table>
<thead>
<tr>
<th>Years of Service</th>
<th>Full-Time</th>
<th>Part-Time*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Up to 3 years of service</td>
<td>4 hours</td>
<td>1 hour for every 20 hours worked</td>
</tr>
<tr>
<td>3-15 years of service</td>
<td>6 hours, plus an additional 4 hours in the last full pay period of the leave year</td>
<td>1 hour for every 13 hours worked</td>
</tr>
<tr>
<td>15 or more years of service</td>
<td>8 hours</td>
<td>1 hour for every 10 hours worked</td>
</tr>
</tbody>
</table>

   * 80 hours in pay status is the maximum that can be used to calculate annual leave earned.

   Employees who are newly appointed or are reappointed following a break in service of at least 90 calendar days from the date of the last period of Federal civilian employment may be eligible to receive service credit for prior non-Federal service or active duty uniformed service. See your servicing personnel office for additional information.

   Employees who are hired after the first workday or that separate from the Federal Government before the last workday of a pay period will not earn annual leave for that pay period.
3. **What is the Annual Leave Ceiling?**

   a. **General Schedule:**
      
      The maximum permissible annual leave carryover is 30 days (240 hours).

   b. **Senior Executive Service:**
      
      The maximum permissible annual leave carryover is 90 days (720 hours).

   Leave in excess of the maximum permissible annual leave carryover is often referred to as “Use or Lose” leave as it is subject to forfeiture.

4. **How is Annual Leave Requested?**

   Employees should request annual leave by using the OPM Form 71, “Request for Leave or Approved Absence” (Appendix F) or other approved written method, such as the time and attendance system. When an employee cannot anticipate the need for leave, he or she should notify the supervisor or other designated staff member of the need for leave (and the expected duration) by the employee’s scheduled start time, or as soon as possible if there are unusual circumstances.

   a. **Must a Reason be Provided When Requesting Annual Leave?**
      
      No. However, a supervisor may inquire about the request if it conflicts with work demands.

   b. **What Considerations are Given to Requests for Annual Leave?**
      
      (1) Supervisors will grant annual leave when employees can be spared from their duties. Supervisors will base disapproval of a request for leave on workload requirements and the number of employees available for office coverage.

      (2) Supervisors may give retroactive approval for emergency annual leave when warranted by the circumstances.

5. **What Happens to Annual Leave When an Employee Separates from the Federal Government?**

   a. Employees will receive a lump-sum payment for any accumulated annual leave and any unused restored annual leave.

   b. Employees who separate to enter active duty in the Armed Forces may elect to receive either a lump-sum payment for the annual leave or have the annual leave
remain to the employee’s credit until his or her return from active duty. However, any restored annual leave will be paid in a lump-sum payment and cannot be credited to the employee’s account upon return to the Federal service.

6. Can Annual Leave be Advanced?

a. **Permanent Employee:** Supervisors may advance only the amount of annual leave that an employee is expected to accrue through the end of the leave year.

b. **Temporary Employee:** Supervisors may advance annual leave up to the amount the employee will earn by the expiration date of the appointment, not to exceed the amount the employee will earn before the end of the leave year, whichever is less.

An employee may request advanced annual leave by submitting a written request to his or her supervisor that includes the dates for which the employee is requesting advanced annual leave and the reason(s).

There is no obligation for supervisors to approve advanced annual leave as it is not an employee entitlement. Supervisors should not approve advanced annual leave if there is reason to believe the employee will not return to duty.

7. How is Advanced Annual Leave Debt Liquidated When an Employee Leaves?

Employees must repay the amount equal to all indebted advanced annual leave before leaving by either retroactively substituting it with paid leave or submitting a cash payment. Employees who do not repay it may be billed for the amount equal to the leave for which they are indebted or the amount owed may be taken from any pay due the employee. This does not apply if the employee’s separation is due to death, disability retirement, or resignation or separation because of disability which prevents the employee from returning to duty or continuing in the Federal service.
Chapter 6

Restoration of Forfeited Annual Leave

1. Can Forfeited Annual Leave Be Restored?

Employees may request restoration of annual leave in excess of the maximum permissible carryover which was forfeited at the end of the leave year when the forfeiture was a result of:

a. Exigency of the public business that precluded the employee from using scheduled annual leave;

b. A period of absence due to sickness or injury that occurred late in the leave year or as of such duration that the excess annual leave could not be rescheduled for use before the end of the leave year; or

c. Administrative error when the error causes the loss of the annual leave.

2. What Constitutes an "Exigency" of the Public Business?

An exigency of the public business pertains to unforeseen operational demands of the office that preclude an employee from using his or her leave. Examples may include disaster duty, an emergency detail, the lapse of appropriations, jury service, etc.

a. Who Determines that an Exigency Exists?

A supervisor can determine whether an exigency exists. The operational requirement for denying or canceling leave must be of such significance that the employee could not be excused from duty during the period of requested leave.

3. What are the Criteria for Restoring Forfeited Leave?

Employees must have:

(1) Scheduled and obtained approval for annual leave in writing before the start of the third pay period prior to the end of the leave year. There is no authority to waive or modify the statutory requirement to schedule leave in advance.

(2) Rescheduled and obtained approval of annual leave in writing before the start of the third pay period prior to the end of the leave year, where possible, when an exigency or sickness resulted in the cancellation of scheduled annual leave during the year.
4. What is the Procedure for Processing a Request for the Restoration of Leave?

After the end of the leave year, employees must submit an Application for Restoration of Annual Leave (Appendix G) to their immediate supervisor who recommends approval or disapproval and forwards to the servicing human resources office (HRO). Once reviewed by the HRO, the request will be submitted to the appropriate Deputy Assistant Secretary or Bureau Director for approval. The request should include the following information:

a. For restored annual leave, a copy of the written request to schedule the leave that is dated before the beginning of the third pay period prior to the end of the leave year. For restored compensatory time off, a copy of the written request to schedule the leave that is dated before the beginning of the third pay period prior to its expiration. All requests must include the dates that the leave was to be used and the total number of hours scheduled;

b. In the case of exigency of public business, an explanation from the supervisor explaining the reason for denying or canceling the leave and an explanation why the leave could not be rescheduled before the end of the leave year. The operational requirement for denying or canceling leave must be of such significance that the employee could not be excused from duty during the period of requested leave. The supervisor must also identify the specific beginning and ending dates of the exigency period during which the employee was prevented from using annual leave;

c. In the case of illness, a statement from the supervisor indicating the period of illness and, if applicable, the reason why the leave could not be rescheduled before the end of the leave year;

d. In the case of administrative error, a statement from the employee explaining the error, accompanied by available documentation, and certified by the supervisor;

5. What Happens to a Request for Restored Leave After It Is Approved?

If the approving official approves the written request for restored leave, the Application for Restoration of Annual Leave Form,” (Appendix G), will be forwarded to the payroll office. The payroll office will credit the restored leave to the employee’s account. Restored annual leave is maintained in a separate account from the employee’s regular annual leave account.

6. What is the Time Limit for Using Restored Annual Leave?

Employees must use their restored annual leave by the end of the leave year ending 2 years after:

a. The date of restoration of the annual leave forfeited due to administrative error;
b. The date fixed by the approving official as the termination date of the exigency of public business which resulted in forfeiture of the annual leave;

c. The date the employee recovers and is able to return to duty when the leave was forfeited because of sickness.

Restored annual leave that is not used within the established time limits is forfeited with no further right to restoration.
Chapter 7

Sick Leave

1. How Much Sick Leave Do Employees Earn?

<table>
<thead>
<tr>
<th>If you are...</th>
<th>you earn...</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full-time</td>
<td>4 hours each full biweekly pay period</td>
</tr>
<tr>
<td>Part-time</td>
<td>1 hour for each 20 hours worked</td>
</tr>
</tbody>
</table>

There is no ceiling on the amount of sick leave employees may accumulate and carry over from one year to the next.

2. When May Sick Leave Be Approved?

Supervisors may approve a request for sick leave when an employee:

a. Receives medical, dental, or optical examination or treatment;

b. Is sick due to physical or mental illness, injury, pregnancy, or childbirth;

c. Uses sick leave under the provisions of “Sick Leave for Family Care or Bereavement Purposes” and “Sick Leave to Care for a Family Member with a Serious Health Condition.” (See Section 3 and Chapter 8, Section 1);

d. Uses sick leave under the provisions of the “Family and Medical Leave Act of 1993.” (See Section 3 and Chapter 8);

e. Would, as determined by health authorities, jeopardize the health of others by his or her presence on the job because of exposure to a communicable disease; or

f. Must be absent from duty for purposes relating to the adoption of a child. Examples may include but are not limited to: appointments with adoption agencies, social workers, and attorneys; court proceedings; required travel; any periods of time the adoptive parents are ordered or required by the adoption agency or by the court to take time off from work to care for the adopted child; and any other activities necessary to allow the adoption to proceed.
3. What is “Sick Leave for Family Care or Bereavement Purposes,” “Sick Leave to Care for a Family Member with a Serious Health Condition,” and “Family and Medical Leave”?

<table>
<thead>
<tr>
<th>Sick Leave for Family Care or Bereavement Purposes (Paid Sick Leave)</th>
<th>Sick Leave to Care for a Family Member with a Serious Health Condition (Paid Sick Leave)</th>
<th>Family and Medical Leave Act of 1993 (Unpaid and/or Paid Leave)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Most federal full time employees may use a total of up to 104 hours (13 workdays) of sick leave each leave year for general family care and bereavement purposes. (Leave is pro-rated for part-time employees.)</td>
<td>Most Federal employees may use a total of up to 12 administrative workweeks of sick leave each leave year to care for a family member with a serious health condition. If an employee previously has used any portion of the 13 days of sick leave for general family care or bereavement purposes in a leave year, that amount must be subtracted from the 12-week entitlement. If an employee has already used 12 weeks of sick leave to care for a family member with a serious health condition, he or she cannot use an additional 13 days in the same leave year for general family care purposes. An employee is entitled to a total of 12 weeks of sick leave each year for all family care purposes.</td>
<td>Full-time employees who have completed 12 months of Federal Service may use up to 12 administrative workweeks of leave without pay, annual, or sick leave for certain family and medical needs, as specified below, during any 12-month period. (Leave is pro-rated for part-time employees.)</td>
</tr>
</tbody>
</table>

Purpose:

1. Provide care for a family member who is incapacitated as a result of physical or mental illness, injury, pregnancy, or childbirth; Provide care for a family member as a result of medical, dental, or optical examination or treatment; or Make arrangements necessitated by the death of a family member or attend the funeral of a family member.

Purpose:

To care for a family member with a serious health condition.1

Purpose:

1. Birth of your son or daughter and the care of such son or daughter (within 1 year after birth); 2. Placement of a son or daughter with you for adoption or foster care (within 1 year after placement); 3. Care of spouse, son, daughter, or parent with a serious health condition1; or 4. Serious health condition1 which makes you unable to perform one or more of the essential functions of your position.

"Family member" is defined as:
• Spouse, and parents thereof;  
• Children, including adopted children, and spouses thereof;

"Family member" is defined as:
• Spouse, and parents thereof;  
• Children, including adopted children, and spouses thereof;

1
• Parents;
• Brothers and sisters, and spouses thereof; and
• Any individual related by blood or affinity whose close association with you is the equivalent of a family relationship.

Employees may request sick leave for family care or bereavement purposes by using the OPM Form 71, "Request for Leave or Approved Absence."

Employees may request sick leave to care for a family member with a serious health condition by using the OPM Form 71, "Request for Leave or Approved Absence."

Employees may invoke their entitlement to leave under the FMLA by annotating the “Family and Medical Leave” section of the OPM Form 71, "Request for Leave or Approved Absence."

Employees should also complete the Form WH-380, “Certification of Health Care Provider (Family and Medical Leave Act of 1993)."

See Chapter 7, "Sick Leave," and Chapter 8, "Family & Medical Leave," or contact your servicing personnel office for additional information.

1 Refer to Chapter 8, Section 1(b) for the definition of a serious health condition.

4. How Much Sick Leave May be Used for a Family Member?

a. Sick Leave for Family Care or Bereavement Purposes

Full-time employees may use 104 hours (13 workdays) of sick leave each year for the family care or bereavement purposes described above. Part-time employees and employees with uncommon tours of duty are also covered, and the amount of sick leave permitted is pro-rated in proportion to the average number of hours of work in the employee’s scheduled tour of duty each week.

b. Sick Leave to Care for a Family Member with a Serious Health Condition

Full-time employees may use a total of up to 12 administrative workweeks of sick leave each leave year to care for a family member with a serious health condition, which is defined in Chapter 8, Section 1(b).

At the discretion of the agency, an employee may be advanced a maximum of 30 days of sick leave (or a proportional amount for an employee on a part-time schedule or uncommon tour of duty) to provide care for a family member with a serious health condition.
5. **How is Sick Leave Requested?**
   
a. Employees should request approval from their supervisor using the OPM Form 71, "Request for Leave or Approved Absence," (Appendix F) in advance, where possible, or other approved written method, such as the time and attendance system.

   b. If an employee is too sick to come to work, he or she should call the supervisor or other designated staff member within one hour of when the employee normally reports to work. If the illness continues beyond one day, the employee must keep the supervisor informed, normally each day.

6. **What is a Medical Certificate and When is One Required?**

   A medical certificate is a written statement signed by a registered practicing physician or other practitioner certifying the employee’s incapacity, examination, or treatment, or to the period of disability during which the employee was receiving professional treatment.

   a. Supervisors may request a medical certificate for absences in excess of 3 workdays. When the nature of the illness is such that the employee does not need to see a medical practitioner, the supervisor may consider the employee’s written statement concerning the illness. Prolonged absences may require periodic medical certification. Supervisors may also request a medical certificate for absences of less than 3 workdays if the employee is believed to be abusing leave privileges.

   b. Supervisors will require employees to submit a medical certificate to justify requests for advanced sick leave.

   Employees must provide the required written medical certification for the use of sick leave, signed by the health care provider, no later than 15 calendar days after the date the supervisor requests such medical certification.

7. **What Happens if an Employees Abuses Sick Leave Privileges?**

   When a supervisor has reason to believe that an employee is misusing or abusing sick leave, the supervisor may restrict the use of sick leave. The supervisor should coordinate with the servicing personnel office and then notify the employee in writing that:

   a. The employee must submit a medical certificate to support the use of sick leave for all medically-related absences; and

   b. Unjustified absences will be charged as absent without leave (AWOL) and may subject the employee to disciplinary action.
8. Can Sick Leave be Advanced?

a. **Permanent Full-Time Employee:** Supervisors may advance a maximum of 30 workdays (240 hours) of sick leave provided the employee’s request includes a medical certificate or other supporting documentation.

b. **Appointment of Limited Duration:** Supervisors may advance a maximum of 30 workdays (240) hours of sick leave provided the employee’s request includes a medical certificate or other supporting documentation and does not exceed the amount he or she would earn during the term of the appointment.

c. **Applicant for Disability Retirement:** Supervisors may not advance an employee sick leave once the employee files an Application for Disability Retirement.

If the sick leave is being used for family care or bereavement purposes or to care for a family member with a serious health condition, only the first 40 hours of sick leave (or a proportional amount for an employee on a part-time schedule or uncommon tour of duty) may be advanced. (See Section 3)

An employee may request advanced sick leave by submitting a written request to his or her supervisor that includes the dates and reasons for which the employee is requesting advanced sick leave and supporting documentation.

There is no obligation for supervisors to approve advanced sick leave as it is not an employee entitlement. Supervisors should not approve advanced sick leave if there is reason to believe the employee will not return to duty.

9. How is Advanced Sick Leave Liquidated if an Employee Leaves?

Employees must repay all advanced sick leave before leaving Federal service by either retroactively substituting it with paid leave or submitting a cash payment. If it is not repaid, the employee may be billed for the amount equal to the leave for which he or she is indebted or the amount owed may be taken from any pay due the employee, such as the final salary payment, and/or lump sum annual leave payment, etc. This does not apply if the employee’s separation is due to death, disability retirement, or resignation or separation because of disability which prevents the employee from returning to duty or continuing in the Federal service.

10. If I Return to Federal Service What Happens to Previously Earned Sick Leave?

The servicing personnel office will credit an employee’s sick leave when there is a break in service (without regard to the date of separation) if the employee returned to Federal employment on or after December 2, 1994, unless the sick leave was forfeited upon reemployment before this date.
11. Can Sick Leave be Used to Compute My Retirement Annuity?

It depends on the employee’s retirement system. For those employees who retire under the Civil Service Retirement System (CSRS) or CSRS-Offset, a balance of unused sick leave will be converted to years, months, and days, and added to the total service time for computing the annuity. The unused sick leave balance cannot be used for meeting the minimum length of service needed to be eligible to retire.

Unused sick leave is not used for computing an annuity under the Federal Employees’ Retirement System (FERS), unless the employee transferred to FERS with at least five years of CSRS civilian service.

For additional information, contact your servicing personnel office.
Chapter 8

Family and Medical Leave Act of 1993 (FMLA)

1. Who is Eligible for FMLA Leave?

An employee is eligible for FMLA leave if he or she has completed at least 12 months of Federal service. This period of service is not required to be 12 recent or consecutive months. Employees serving under a temporary appointment with a time limitation of one year or less and intermittent employees are not eligible.

a. What is the Entitlement?

Full-time employees have a right to 12 administrative workweeks of unpaid leave (i.e., leave without pay) during any 12-month period for:

(1) Birth of a son or daughter and the care of such son or daughter (within 1 year after birth);

(2) Placement of a son or daughter with the employee for adoption or foster care (within 1 year after placement);

(3) Care of a spouse, son or daughter, or parent with a serious health condition; or

(4) An employee’s serious health condition that makes the employee unable to perform one or more of the essential functions of his or her position.

b. What is a Serious Health Condition?

A serious health condition is an illness, injury, impairment, or physical or mental condition that involves:

(1) Inpatient care, i.e., an overnight stay, in a hospital, hospice, or residential medical care facility. This includes any period of incapacity or any subsequent treatment in connection with such impatient care; or

(2) Continuing treatment by a health care provider that includes, but is not limited to, examinations to determine if there is a serious health condition and evaluations of such conditions if the examinations or evaluations determine that a serious health condition exists. Continuing treatment by a health care provider may include one or more of the following:
(A) A period of incapacity of more than 3 consecutive calendar days, including any subsequent treatment or period of incapacity relating to the same condition, that also involves:

(i) Treatment two or more times by a health care provider, by a health care provider under the direct supervision of the affected individual's health care provider, or by a provider of health care services under orders of, or on referral by, a health care provider; or

(ii) Treatment by a health care provider on at least one occasion that results in a regimen of continuing treatment under the supervision of the health care provider (e.g., a course of prescription medication or therapy requiring special equipment to resolve or alleviate the health condition).

(B) Any period of incapacity due to pregnancy or childbirth, or for prenatal care, even if the affected individual does not receive active treatment from a health care provider during the period of incapacity or the period of incapacity does not last more than 3 consecutive calendar days.

(C) Any period of incapacity or treatment for such incapacity due to a chronic serious health condition that:

(i) Requires periodic visits for treatment by a health care provider or by a health care provider under the direct supervision of the affected individual's health care provider,

(ii) Continues over an extended period of time (including recurring episodes of a single underlying condition); and

(iii) May cause episodic rather than a continuing period of incapacity (e.g., asthma, diabetes, epilepsy, etc.). The condition is covered even if the affected individual does not receive active treatment from a health care provider during the period of incapacity or the period of incapacity does not last more than 3 consecutive calendar days.
(D) A period of incapacity which is permanent or long-term due to a condition for which treatment may not be effective. The affected individual must be under the continuing supervision of, but need not be receiving active treatment by, a health care provider (e.g., Alzheimer's, severe stroke, or terminal stages of a disease).

(E) Any period of absence to receive multiple treatments (including any period of recovery) by a health care provider or by a provider of health care services under orders of, or on referral by, a health care provider, either for restorative surgery after an accident or other injury or for a condition that would likely result in a period of incapacity of more than 3 consecutive calendar days in the absence of medical intervention or treatment (e.g., chemotherapy/radiation for cancer, physical therapy for severe arthritis, dialysis for kidney disease).

A serious health condition does not include routine physical, eye, or dental examinations; a regimen of continuing treatment that includes the taking of over-the-counter medications, bed-rest, exercise, and other similar activities that can be initiated without a visit to the health care provider; a condition for which cosmetic treatments are administered, unless inpatient hospital care is required or unless complications develop; or an absence because of an employee's use of an illegal substance, unless the employee is receiving treatment for substance abuse by a health care provider or by a provider of health care services on referral by a health care provider. Ordinarily, unless complications arise, the common cold, the flu, earaches, upset stomach, minor ulcers, headaches (other than migraines), routine dental or orthodontia problems, and periodontal disease are not serious health conditions. Allergies, restorative dental or plastic surgery after an injury, removal of cancerous growth, or mental illness resulting from stress may be serious health conditions only if such conditions require inpatient care or continuing treatment by a health care provider.

c. How is the FMLA Invoked?

(1) Employees must notify their supervisor and complete the OPM Form 71, “Request for Leave or Approved Absence” (Appendix F). Employees may invoke entitlement to FMLA leave retroactively for any previous absence from work provided that they furnish documentation to justify why they were not able to invoke their entitlement at that time. Employees must give advance notice of 30 calendar days if the event is foreseeable.

(2) Employees may also attach a completed U.S. Department of Labor Form WH-380, “Certification of Health Care Provider (Family and Medical Leave Act of 1993).” (Appendix K)
d. When Does an Entitlement Period Begin?

(1) **Family or Medical Need.** The entitlement period begins on the date the employee first takes leave.

(2) **Birth or Placement for Adoption or Foster Care.** The entitlement period may begin before or on the actual date of birth, adoption or foster care placement.

e. How is FMLA Leave Calculated?

Calculate the 12 administrative workweeks on an hourly basis, which equals 12 times the average number of hours in the employee’s regularly scheduled administrative workweek. For example: 12 weeks x 40 hours = 480 (full-time employee) or 12 weeks x 20 hours = 240 (part-time employee).

f. Can a Supervisor Delay a Request for FMLA Leave?

If the need for leave is foreseeable and the employee fails to give 30 calendar days’ notice with no reasonable excuse for the delay of notification, the supervisor may delay the use of leave for up to 30 calendar days after the employee provides notice of the need for FMLA leave.

2. What Happens if the Supervisor Questions an Employee’s Medical Certification?

Clarification of insufficient or unclear medical certification may be requested. If the supervisor doubts the validity of the original certification, the supervisor may require at its expense that:

a. The employee obtain the opinion of a second health care provider designated or approved by the servicing personnel office; or

b. The employee obtains the opinion of a third health care provider when the opinion of the second health care provider differs from the original certification. The opinion of the third health care provider is binding.

3. Can Paid Leave be Substituted for FMLA Leave?

Yes. Employees may elect to substitute annual or sick leave, advanced annual or sick leave, and donated annual leave for any or all FMLA leave consistent with leave regulations. However, employees may not retroactively substitute paid time off for leave without pay.
4. Can Employees Work Part-Time and Use FMLA Leave?

a. Supervisors should approve requests to work part-time and use FMLA leave due to a serious health condition or to care for a family member with a serious health condition when medically necessary.

b. Supervisors may approve a request to work part-time and use FMLA leave for part of each week for the birth and care of a son or daughter, or placement of the son or daughter for adoption or foster care.

5. Is There an Entitlement to the Same Position Upon Returning to Work?

The entitlement is to return to the same or equivalent position unless the employee would not otherwise have been employed in the position at the time the employee returns from leave.
Chapter 9

Voluntary Leave Transfer Program

1. What is the Voluntary Leave Transfer Program?

The Voluntary Leave Transfer Program was established to permit employees to donate annual leave directly to another Federal employee (excluding the leave donor’s immediate supervisor) who has a personal or family medical emergency and who has exhausted his or her available paid leave.

a. What is a Medical Emergency?

A medical emergency is a medical condition an employee or a family member has that is, or is expected to require an absence from duty for at least 24 hours without paid leave, or, in the case of a part-time employee, at least 30 percent of the average number of hours in his or her biweekly schedule.

In cases of pregnancy and childbirth, donated annual leave may only be used for a medical emergency, e.g., the mother’s period of incapacitation or the illness of a child, and may not be used to provide care for a healthy child.

b. What is the Definition of a Family Member?

Family members consist of:

(1) Spouse, and parents thereof;
(2) Children, including adopted children, and spouses thereof;
(3) Parents;
(4) Brothers and sisters, and spouses thereof; and
(5) Any individual related by blood or affinity whose close association with the employee is the equivalent of a family relationship.

c. What is a Leave Transfer Recipient?

A leave transfer recipient is a current Federal employee for whom a government agency approved an application to receive annual leave through the Voluntary Leave Transfer Program.
2. How Does an Employee Become a Leave Transfer Recipient?

If an employee has a personal or family medical emergency and not enough leave to cover an absence of over 24 hours, he or she may apply in writing to become a leave transfer recipient. A personal representative may apply on behalf of an employee who is incapable of making an application.

a. How Does an Employee Apply?

The employee or his or her representative must:

(1) Complete the form OPM 630, “Application to Become a Leave Recipient under the Voluntary Leave Transfer Program” (Appendix H);

(2) Include a statement regarding the reasons for needing the transferred leave, including a brief description of the nature, severity, and anticipated duration of the medical emergency, and if it is a recurring one, the approximate frequency of the medical emergency;

(3) Submit certification from a physician or other appropriate expert, with respect to the medical emergency, to include the anticipated duration of the medical emergency and any additional information. If certification from more than one source is necessary, the employee will be reimbursed for the cost;

(4) Send these materials to the immediate supervisor.

b. What is the Supervisor's Role in the Process?

Supervisors must:

(1) Indicate whether he or she concurs with the request and forwards the application and attachments to the servicing personnel office.

(2) In consultation with the servicing personnel office, monitor the status of the medical emergency to ensure that the medical emergency still exists; and

(3) Keep the servicing personnel office informed.
c. What is the Role of the Servicing Personnel Office (SPO)?

The SPO will:

(1) Review the application for completeness;

(2) Notify the employee (or the employee’s personal representative) of the decision within 10 calendar days after receipt of the application. Should the approving official disapprove the application, the SPO will include the reasons for disapproval in the notice;

(3) Ensure the issuance of a notice to all employees informing them that the employee is an approved leave transfer recipient (which includes a brief description of the medical emergency, unless the employee elects to withhold the distribution of any aspect of this information); and

(4) Maintain all records pertaining to the leave transfer file.

d. How is Donated Annual Leave Used?

After all paid leave has been exhausted, donated annual leave may be used consecutively or intermittently for:

(1) Approved medical emergency purposes. Donated annual leave accumulates without regard to the "Use or Lose" limitations; and

(2) Retroactive substitution of LWOP or to liquidate indebtedness for any period of advanced annual or sick leave that began on or after the beginning date of the medical emergency.

e. What Happens to Donated Leave When an Employee Transfers to Another Agency?

When there is a transfer without a break in service, the servicing personnel office will transfer the unused donated annual leave to the new agency should the medical emergency continue.

Donated leave may not be transferred to another leave recipient, included in a lump-sum payment, or credited upon an employee’s reemployment by a Federal agency.
f. How Does Leave Accrue for an Employee in a “Shared Leave Status?”

When an employee is using transferred leave, annual and sick leave accrue to his or her credit at the same rate as if the employee were in a paid leave status. The maximum amount of annual and sick leave that the employee may accrue while in a shared leave status may not exceed 40 hours of each. This amount will be pro-rated for part-time employees. This leave will be maintained in special “set-aside accounts” that are separate from regular leave accounts.

g. When is the Leave Accrued in the “Set-Aside Accounts” Available for Use?

(1) **During the Medical Emergency:** Employees may use any accrued leave after all transferred annual leave has been exhausted.

(2) **After the Medical Emergency Terminates:** Employees may use any leave accrued as of the beginning of the first pay period beginning on or after the date the medical emergency terminates.

h. When Does the Medical Emergency Terminate?

The medical emergency terminates under the leave transfer program:

(1) When the employee leaves Federal service;

(2) At the end of the biweekly pay period in which the SPO receives written notice from the employee or the employee’s personal representative that he or she is no longer affected by a medical emergency;

(3) At the end of the biweekly pay period in which the SPO determines, after written notice to the employee and an opportunity for the employee (or, if appropriate, the employee’s personal representative) to answer orally or in writing, that he or she is no longer affected by a medical emergency;

(4) At the end of the biweekly pay period in which the SPO receives notice that the Office of Personnel Management approved the employee’s application for disability retirement; or

(5) Upon the supervisor's determination, absent any additional acceptable medical documentation.

When the medical emergency terminates, the SPO will not grant any further requests for the transfer of annual leave to the employee.
3. **Who is a Leave Donor?**

A leave donor is an employee who submits a written request to voluntarily transfer annual leave to an approved leave recipient.

a. **How May an Employee Become a Leave Donor?**

An employee may become a leave donor by submitting the following to the Servicing Personnel Office:

(1) Form OPM 630-A, “Request to Donate Annual Leave to Leave Recipient Under the Voluntary Leave Transfer Program (Within Agency),” (Appendix I), to request the transfer of a specific number of hours of annual leave to a specified IA or DOI leave recipient; or

(2) Form OPM 630-B, “Request to Donate Annual Leave to Leave Recipient Under the Voluntary Leave Transfer Program (Outside Agency),” (Appendix J), to donate annual leave to an approved leave recipient at another Federal agency.

Other Federal agency employees may donate leave to an approved leave transfer recipient by submitting the form OPM 630-B to the leave donor’s servicing personnel office.

An employee may not donate annual leave to his or her immediate supervisor.

b. **How Much Annual Leave May be Donated?**

(1) Employees may donate no more than one-half of their annual leave entitlement during the leave year in which they make the donation, except as provided below.

(2) The maximum amount of “Use or Lose” leave an employee may donate during the leave year must be the lesser of:

(a) One-half of the amount of annual leave the employee would accrue during the leave year the donation was made; or

(b) The number of hours remaining in the leave year (as of the date of the transfer) for which the employee is scheduled to work and receive pay.
4. **What Happens to Any Unused Donated Annual Leave?**

   a. Leave donors who are on the rolls of a Federal agency on the date of restoration will receive a prorated amount of unused donated leave. The amount of leave restored to the donors will not exceed the amount donated.

   b. When there are more eligible donors than annual leave hours remaining for restoration, no unused transferred annual leave will be restored to their accounts.

   c. Employees may elect to have unused transferred annual leave restored by:

      (1) Crediting the restored annual leave to their annual leave account in the current leave year;

      (2) Crediting the restored annual leave to their annual leave account effective as of the first day of the following leave year; or

      (3) Donating such leave in whole or in part to other leave recipient(s).

      Transferred annual leave restored to an employee’s account under paragraphs (1) or (2) is subject to the “Use or Lose” leave provision.
Chapter 10
Other Paid Leave

1. What is Other Paid Leave?
   a. Military Leave
   b. Funeral Leave
   c. Court Leave
   d. Leave for Bone-Marrow or Organ Donation
   e. Excused Absence

2. Who is Eligible for Military Leave?
   A permanent or temporary full-time employee with an appointment that exceeds one year, is entitled to leave without loss in pay, time, or performance or efficiency rating for active duty, inactive-duty training, or engaging in field or coast defense training as a Reserve of the Armed Forces or member of the National Guard.
   
   a. How Does Military Leave Accrue?
      
      **Full-time Employees:** Employees receive 120 hours (15 workdays) per fiscal year and, to the extent that it is not used in a fiscal year, military leave accumulates for use in the succeeding fiscal year until it totals 15 workdays at the beginning of a fiscal year.

      **Part-time Employees:** The accrual is determined by dividing 40 into the number of hours in the employee’s regularly scheduled workweek during that fiscal year.

   b. How Is Military Leave Charged?
      
      Military leave is charged in one-hour increments and excludes holidays and non-workdays.
c. How is Military Leave Requested?

Employees should complete the OPM Form 71, “Request for Leave or Approved Absence,” (Appendix F) or use an approved written method, such as the time and attendance system, and provide a copy of the military orders to their supervisor as far in advance as possible. Upon the employee’s return to duty, he or she must submit certification of attendance showing his or her name and the specific days that military service was performed.

d. What are the Other Purposes for Military Leave?

Military leave may be used for:

(1) Enforcement Purposes.

A full-time employee and a reservist in the Armed Forces or the National Guard may use military leave to provide military aid to enforce the law, or provide assistance to civil authorities in the protection or saving of life or property or the prevention of injury, without loss of or reduction in pay, leave, credit for time or service, or performance or efficiency rating. The maximum is 22 workdays (176 hours) in a calendar year.

(2) Parade or Encampment.

A full-time employee and a member of the National Guard of the District of Columbia may use military leave without loss in pay or time for each day of a parade or encampment the commanding general ordered or authorized under Title 39, District of Columbia Code. An employee may use the amount of leave necessary to cover each day of service.

3. Who is Eligible for Funeral Leave?

Employees are entitled to a maximum of three days of funeral leave, which is a paid authorized absence from duty, to make arrangements or attend the funeral or memorial service of an immediate relative who died as a result of wounds, disease, or injury incurred while serving as a member of the Armed Forces in a combat zone, as determined by the President. Funeral leave should not be confused with sick leave for bereavement purposes.

To request funeral leave, employees should use the OPM Form 71, “Request for Leave or Approved Absence,” (Appendix F) or other approved written method, such as the time and attendance system, and provide acceptable documentation to their supervisor.

4. Who is Eligible for Court Leave?

Permanent and temporary-indefinite employees qualify for court leave, which is a paid authorized absence from duty, when called to jury duty or asked to be a witness in a non-
official capacity on behalf of any party in connection with any judicial proceeding to which the United States, the District of Columbia or a state or local government is a party.

Employees who are required to testify in court in an official capacity are considered to be working, not on court leave.

Employees will not be granted court leave for personal reasons such as traffic tickets, small claims cases, to testify in divorce proceedings, or other administrative hearings.

a. **What Happens if an Employee is on Annual Leave and is Summoned for Jury Duty?**

Should this happen, employee should notify the supervisor as soon as possible so court leave can be substituted for annual leave.

b. **What Happens if an Employee is on Leave Without Pay and Summoned for Jury Duty?**

The supervisor will continue to carry the employee in a leave without pay status since court leave is only available when one is in a paid status. In this situation, the employee may keep the jury fees he or she receives from any court.

c. **Must an Employee Return to Duty When Excused by the Court?**

The employee does not have to return to duty when only 2 hours or less remain in the working day. Otherwise, the employee should return to duty or take leave.

d. **Must Evidence of Attendance for Jury Duty be Provided?**

Yes. When jury duty ends, employees must give their supervisors written evidence showing the actual dates of attendance. Employees may obtain a statement from the clerk of the court.

e. **Can Jury or Witness Service Fees be Kept?**

Federal regulations prohibit employees from receiving fees for jury duty or service as a witness. However, employees may keep transportation payments, meals, and lodging fees.

5. **Who is Eligible for Bone-Marrow or Organ Donor Leave?**

A full-time employee who serves as a bone-marrow donor may use up to 7 workdays of excused absence each calendar year, and up to 30 workdays each calendar year to serve as an organ donor. These amounts are pro-rated for part-time employees.

6. **When May an Employee be Granted Excused Absence?**
An excused absence is an absence from duty with pay and without charge to leave. There is no entitlement to excused absence. Supervisors and managers may excuse employees on an individual basis under circumstances that are in the public interest or consistent with prevailing practices of other Federal agencies in the local area. When supervisors and managers exercise this authority, they must document the use of excused absence (administrative leave) in the time and attendance system.

Employees may be excused from duty under the following circumstances:

a. **Civic Responsibilities.**

   (1) Voting and Registration.

   (a) **Local Area.** Where the polls are not open at least 3 hours before or after an employee’s regular hours of work, the supervisor may grant up to three (3) hours of administrative leave in the morning or the afternoon to allow the employee to vote, whichever provides the lesser time off.

   (b) **Beyond Commuting Distance.** If an employee’s voting place is beyond normal commuting distance and vote by absentee ballot is not permitted, the employee may be granted sufficient time off to make the trip to the voting place to vote. Where more than one day is required to make the trip to the voting place, the employee must request and receive approval for annual leave, or leave without pay, if annual leave is not available.

   (c) **Jurisdiction Requiring In-Person Registration.** An employee who votes in a jurisdiction which requires registration in person may be granted time off to register on substantially the same basis as for voting, except that no such time shall be granted if registration can be accomplished on a non-work day and the place of registration is within reasonable one-day, round-trip distance of the employee’s place of residence.

   (2) Donating blood, not to exceed four (4) hours on site for donation and recovery, under the Blood Donor Program, or when an employee donates in answer to emergency calls for special blood types.

   (3) Performing Military or Veteran Honor Guard duties and functions.

b. **Medical Purposes.**

   (1) Vaccination or inoculation in cases of epidemic or threatened epidemic, and for a follow-up medical check, if required.

   (2) Obtaining medical attention because of an on-the-job injury. There will not be a charge to annual or sick leave if medical attention is required on the
day the injury occurred. For further information, contact your servicing personnel office.

(3) Physical examination for induction into the military service or for an administratively required physical.

c. Other Situations.

The following are examples of other situations for which supervisors may grant excused absence:

(1) Occasional tardiness or brief absence from duty;

(2) Attending a government sponsored health benefits fair and reviewing Federal employee health benefits information and materials;

(3) Dealing with the aftermath of a natural disaster, i.e., hurricane, tornado, flood, etc., that affects the employee;

(4) When it is in the best interest of the Government to have an employee out of the worksite during an investigation or advance notice period, a supervisor will relieve an employee from duty and continue him or her in a pay status without charge to leave until the issue is resolved. This should be coordinated with the servicing personnel office;

(5) Providing emergency law enforcement, relief, or clean-up efforts authorized by Federal, State, or local officials having jurisdiction. (Military leave is appropriate for members of the National Guard or Reserves who are called up to assist); or

(6) Preparing responses to grievances, and proposed disciplinary and adverse actions. (Bargaining unit employees should refer to their collective bargaining agreement.)
Chapter 11
Leave Without Pay (LWOP)

1. **What is LWOP?**

LWOP is a temporary approved absence from duty in a non-pay status, generally granted at the employee’s request.

a. **What are the Guidelines for Approving LWOP?**

An approving official must determine if the employee’s needs are sufficient to offset the cost and inconvenience resulting from retaining him/her in a LWOP status. The approving official must consider:

1. Encumbrance of a position;
2. Loss of services;
3. Complication of retention preference registers in the event of a reduction-in-force;
4. Obligation to provide active employment at the end of the leave period;
5. Government insurance at Government expense; and
6. Six months retirement credit for which the Government pays.

There must be a reasonable expectation that the employee will return to duty in an active, productive capacity at the end of the period of LWOP.

b. **When may LWOP be Granted?**

Examples of situations in which employees may request LWOP are:

1. Invoking their entitlement to a total of up to 12 weeks of LWOP during any 12-month period for certain family and medical needs under the Family and Medical Leave Act of 1993;
2. Performing service in the uniformed services, in accordance with the Uniformed Services Employment and Reemployment Rights Act of 1994;
3. A disabled veteran in need of necessary medical treatment under Executive Order 5396;
1 Routine family medical purposes, such as routine medical or dental appointments, such as annual checkups or vaccinations;

1 School and early childhood educational activities directly related to the educational advancement of a child. This would include parent-teacher conferences or meetings with child-care providers, interviewing for a new school or child-care facility, or participating in volunteer activities supporting the child’s educational advancement. A "school" refers to an elementary school, secondary school, head start program, or a child-care facility;

1 An elderly relative’s health or care needs, such as routine medical or dental appointments or making arrangements for housing, meals, phones, banking services, etc.;

An employee who is seeking Federal employment in another geographic location when the employee’s spouse is being relocated by his or her employer (up to 3 months);

Educational purposes, i.e., job-related studies and activities that will improve the employee’s job skills (up to 1 year).

c. How Much LWOP May Supervisors Approve?

Supervisors one administrative level higher than the immediate supervisor may approve up to 30 calendar days of LWOP.

d. Can LWOP Automatically Terminate?

Yes, when an employee accepts an appointment to another Federal position, or at the expiration of the employee’s appointment.

2. What is Extended LWOP and the Procedure for Requesting It?

Extended LWOP is a period of absence exceeding 30 calendar days for employees with a regularly scheduled tour of duty.

Employees must submit a written request with justification giving specific reasons for a request for extended LWOP. Bureau Directors must forward the approved request to the servicing personnel office. Information concerning the impact of LWOP in excess of 30

1 Generally, the amount of LWOP that may be granted for any combination of circumstances listed in (4), (5) and (6) is up to 24 hours during any 12-month period. However, this does not limit or prohibit an employee from requesting and receiving additional leave or other time off for routine family medical purposes, school activities and elderly relatives’ health needs.
calendar days may be obtained from the servicing personnel office.
## Appendix A

### Indian Affairs

#### Alternative Work Schedules

#### Comparison of Options

<table>
<thead>
<tr>
<th>TYPE of AWS</th>
<th>CREDIT HOURS&lt;sup&gt;1&lt;/sup&gt;</th>
<th>CORE TIME</th>
<th>FLEXIBLE TIME BANDS</th>
<th>AWS DAYS OFF</th>
<th>FLEXI-LUNCH W/SUPV. APPROVAL&lt;sup&gt;2&lt;/sup&gt;</th>
<th>“SWAP” AWS DAY OFF</th>
<th>HOLIDAYS&lt;sup&gt;3&lt;/sup&gt;</th>
<th>LEAVE&lt;sup&gt;3&lt;/sup&gt;</th>
<th>ADMIN LEAVE&lt;sup&gt;3&lt;/sup&gt;</th>
</tr>
</thead>
<tbody>
<tr>
<td>FLEXITIME (Gliding Schedule)</td>
<td>YES</td>
<td>YES</td>
<td>YES</td>
<td>NONE</td>
<td>YES</td>
<td>N/A</td>
<td>8 HRS</td>
<td>8 HRS</td>
<td>UP TO 8 HRS</td>
</tr>
<tr>
<td>COMPRESS ED 5/4-9</td>
<td>NO</td>
<td>NO</td>
<td>NO</td>
<td>1/PP</td>
<td>NO</td>
<td>NO</td>
<td>UP TO 9 HRS</td>
<td>UP TO 9 HRS</td>
<td>UP TO 9 HRS</td>
</tr>
<tr>
<td>COMPRESS ED 4/10</td>
<td>NO</td>
<td>NO</td>
<td>NO</td>
<td>1/WK</td>
<td>NO</td>
<td>NO</td>
<td>UP TO 10 HRS</td>
<td>UP TO 10 HRS</td>
<td>UP TO 10 HRS</td>
</tr>
<tr>
<td>FULL MAXIFLEX</td>
<td>YES</td>
<td>YES</td>
<td>YES</td>
<td>2/PP</td>
<td>YES</td>
<td>YES</td>
<td>8 HRS</td>
<td>UP TO 12 HRS</td>
<td>UP TO 8 HRS</td>
</tr>
<tr>
<td>MAXIFLEX 5/4-9</td>
<td>YES</td>
<td>YES</td>
<td>YES</td>
<td>1/PP</td>
<td>YES</td>
<td>YES</td>
<td>8 HRS</td>
<td>UP TO 9 HRS</td>
<td>UP TO 9 HRS</td>
</tr>
<tr>
<td>MAXIFLEX 4/10</td>
<td>YES</td>
<td>YES</td>
<td>YES</td>
<td>1/WK</td>
<td>YES</td>
<td>YES</td>
<td>8 HRS</td>
<td>UP TO 10 HRS</td>
<td>UP TO 10 HRS</td>
</tr>
</tbody>
</table>

<sup>1</sup>Members of the Senior Executive Service (SES) may not accumulate credit hours. 5 CFR § 610.408

<sup>2</sup>Lunch may NOT be scheduled at beginning or end of the work day.

<sup>3</sup>These figures are for full time employees only. Part time employees are paid only the number of hours for which they are scheduled on that day. If a part time employee is on full Maxiflex, refer to the guidance in this policy.
# Indian Affairs
## Sample Schedules – Compressed and Maxiflex

### Compressed 5-4/9 or Maxiflex 5-4/9

<table>
<thead>
<tr>
<th>MON</th>
<th>TUE</th>
<th>WED</th>
<th>THU</th>
<th>FRI</th>
<th>MON</th>
<th>TUE</th>
<th>WED</th>
<th>THU</th>
<th>FRI</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>9</td>
<td>9</td>
<td>9</td>
<td>9</td>
<td>8</td>
<td>9</td>
<td>9</td>
<td>9</td>
<td>9</td>
</tr>
</tbody>
</table>

1st Monday off

<table>
<thead>
<tr>
<th>MON</th>
<th>TUE</th>
<th>WED</th>
<th>THU</th>
<th>FRI</th>
<th>MON</th>
<th>TUE</th>
<th>WED</th>
<th>THU</th>
<th>FRI</th>
</tr>
</thead>
<tbody>
<tr>
<td>8</td>
<td>9</td>
<td>9</td>
<td>9</td>
<td>9</td>
<td>0</td>
<td>9</td>
<td>9</td>
<td>9</td>
<td>9</td>
</tr>
</tbody>
</table>

2nd Monday off

<table>
<thead>
<tr>
<th>MON</th>
<th>TUE</th>
<th>WED</th>
<th>THU</th>
<th>FRI</th>
<th>MON</th>
<th>TUE</th>
<th>WED</th>
<th>THU</th>
<th>FRI</th>
</tr>
</thead>
<tbody>
<tr>
<td>9</td>
<td>9</td>
<td>9</td>
<td>9</td>
<td>0</td>
<td>9</td>
<td>9</td>
<td>9</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

1st Friday off

<table>
<thead>
<tr>
<th>MON</th>
<th>TUE</th>
<th>WED</th>
<th>THU</th>
<th>FRI</th>
<th>MON</th>
<th>TUE</th>
<th>WED</th>
<th>THU</th>
<th>FRI</th>
</tr>
</thead>
<tbody>
<tr>
<td>9</td>
<td>9</td>
<td>9</td>
<td>9</td>
<td>8</td>
<td>9</td>
<td>9</td>
<td>9</td>
<td>9</td>
<td>0</td>
</tr>
</tbody>
</table>

2nd Friday off

### Compressed 4/10 or Maxiflex 4/10

<table>
<thead>
<tr>
<th>MON</th>
<th>TUE</th>
<th>WED</th>
<th>THU</th>
<th>FRI</th>
<th>MON</th>
<th>TUE</th>
<th>WED</th>
<th>THU</th>
<th>FRI</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>10</td>
<td>10</td>
<td>10</td>
<td>10</td>
<td>0</td>
<td>10</td>
<td>10</td>
<td>10</td>
<td>10</td>
</tr>
</tbody>
</table>

Mondays off

<table>
<thead>
<tr>
<th>MON</th>
<th>TUE</th>
<th>WED</th>
<th>THU</th>
<th>FRI</th>
<th>MON</th>
<th>TUE</th>
<th>WED</th>
<th>THU</th>
<th>FRI</th>
</tr>
</thead>
<tbody>
<tr>
<td>10</td>
<td>10</td>
<td>10</td>
<td>10</td>
<td>0</td>
<td>10</td>
<td>10</td>
<td>10</td>
<td>10</td>
<td>0</td>
</tr>
</tbody>
</table>

Fridays off
Appendix C

Indian Affairs
Flexitime (Gliming Schedule) Work Schedule Agreement

Employee Name: ____________________________________________________________

Position Title/Series/Grade: ________________________________________________

I would like to work Flexitime. My flexible arrival time band would be from _______ a.m. to _______ a.m., and my flexible departure time band would be from _______ p.m. to _______ p.m. I understand that I may not arrive earlier than the beginning of the arrival band nor depart later than the end of the departure band. I may take a flexible lunch with my supervisor’s approval between the hours of _______ a.m. and _______ p.m. Core hours are 9:00 a.m. to 3:30 p.m. on Monday through Friday.

I understand that I am required to be present at work on each of the ten workdays of the pay period and during core time as indicated above, or I must account for my absence with compensatory time off, credit hours or the appropriate leave or other excused absence.

I have read, understand and agree to all the provisions of the Indian Affairs AWS policy that are applicable to the work schedule I have requested.

I understand that Flexitime is a privilege and as such I have no inherent right to a Flexitime schedule and that the approval of my Flexitime request is at the sole discretion of my supervisor.

I understand that I may be requested to arrive at an alternative or a specific time on occasion, when necessary to provide office coverage, attend meetings, training, or conferences and that when requested I must comply.

I understand that I will not be paid for work in excess of eight hours on any workday unless I am authorized and approved to perform credit hours, or ordered to work overtime.

Employee Signature: ___________________________ Date: ________________

_______ Approved   _______ Not approved

Supervisor Signature: ___________________________ Date: ________________

Second Level Supervisor Concurrence: _______________ Date: ________________
(Only for “Not approved” and the reason must be articulated to the employee in writing. You may attach the explanation to this agreement.)
Appendix D

Indian Affairs
Maxiflex Work Schedule Agreement

Employee Name: ______________________________________________________________________________________

Position Title/Series/Grade: ____________________________________________________________________________

_____ I would like to work full Maxiflex. My flexible arrival time band would be from ______ a.m. to ______ a.m., and my flexible departure time band would be from ______ p.m. to ______ p.m. I understand that I may not arrive earlier than the beginning of the arrival band nor depart later than the end of the departure band. I may take a flexible lunch with my supervisor’s approval between the hours of ______ a.m. and ______ p.m. Core hours are 9:00 a.m. to 3:30 p.m. on _________________ (days of the week).

I understand that I must inform my immediate supervisor of my planned work schedule by the beginning of each pay period.

OR

_____ I would like to work Maxiflex 5/4-9 OR 4/10. My flexible arrival time band would be from ______ a.m. to ______ a.m., and my flexible departure time band would be from ______ p.m. to ______ p.m. I understand that I may not arrive earlier than the beginning of the arrival band nor depart later than the end of the departure band. I may take a flexible lunch with my supervisor’s approval between the hours of ______ a.m. and ______ p.m. Core hours are 9:00 a.m. to 3:30 p.m. on _________________ (days of the week).

My schedule will be:

<table>
<thead>
<tr>
<th>MON</th>
<th>TUE</th>
<th>WED</th>
<th>THU</th>
<th>FRI</th>
<th>MON</th>
<th>TUE</th>
<th>WED</th>
<th>THU</th>
<th>FRI</th>
</tr>
</thead>
</table>

I have read, understand and agree to all the provisions of the Indian Affairs AWS policy that are applicable to the work schedule I have requested.

I understand that Maxiflex is a privilege and as such I have no inherent right to a Maxiflex schedule and that the approval of my Flexitime request is at the sole discretion of my supervisor.

I understand that I may not work more that 12 hours in a day unless required to do so as overtime. I further understand that I may be requested to arrive at an alternative or a specific time on occasion when necessary to provide office coverage, attend meetings, training, or conferences and that, when requested, I must comply.

Employee Signature: ___________________________________________ Date: ______________

_____ Approved

_____ Not approved

Supervisor Signature: ___________________________________________ Date: ______________

Second Level Supervisor Concurrence: ___________________________ Date: ______________

(Only for “Not approved” and the reason must be articulated to the employee in writing. You may attach the explanation to this agreement.)
Appendix E

Indian Affairs
Compressed Work Schedule Agreement

Employee Name: ________________________________________________________________

Position Title/Series/Grade: ______________________________________________________

I would like to work the following compressed work schedule:

<table>
<thead>
<tr>
<th>MON</th>
<th>TUE</th>
<th>WED</th>
<th>THU</th>
<th>FRI</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>5-9</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>MON</th>
<th>TUE</th>
<th>WED</th>
<th>THU</th>
<th>FRI</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>4-10</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Employee Certification:

My supervisor and I have agreed that my arrival time will be: ________ a.m.

I have read, understand and agree to all the provisions of the Indian Affairs AWS policy that are applicable to the work schedule I have requested.

I understand that I must arrive this time every workday morning or account for late arrival or absence with compensatory time off or appropriate leave or other excused absence.

I understand that a Compressed Work Schedule is a privilege and as such I have no inherent right to a Compressed Work Schedule and that this agreement may be revoked at any time if my needs change or if my supervisor determines it appropriate to do so.

I understand that I am not permitted to work any time in excess of this schedule unless ordered and authorized to do so as overtime work for which I will be compensated by either premium pay or compensatory time as appropriate. I cannot earn credit hours and will not expect my supervisor to allow me to maintain “off the record” time off balances.

I certify that I have already exhausted my existing credit hour balance.

Employee Signature: ___________________________ Date: ______________

_____ Approved  __________ Not approved

Supervisor Certification:

I certify that approval of this work schedule will not be disruptive to office coverage or productivity.

Signature: ___________________________ Date: ______________

Second Level Supervisor Concurrence: __________________ Date: ______________

(Only for “Not approved” and the reason must be articulated to the employee in writing. You may attach the explanation to this agreement.)
Appendix H

Request for Restoration of Forfeited Leave

Part I. Request for Exigency Determination (to be made at time of cancellation/disapproval)

a. Identification:
   1. ___________________________________
   2. _______________________
   Employee Name:  Last, First, Middle Initial           Social Security Number
   3. ____________________________________
   Employing Office

b. Public Exigency Request:
   1. Date Leave Requested _________Date Leave Approved____________(attach copy of SF-71)
   2. Period:   from ___________to__________, number of hours__________
   3. Date leave was disapproved or cancelled____________.  Number of hours cancelled_______
      Number of hours allowed to be taken, if any _________
   4. Number of hours subject to forfeiture ________________

c. Supervisor's Statement:
   1. (On reverse explain nature of exigency, including beginning and ending dates and efforts
   made to schedule and reschedule the leave.)
   ________________________________________________________________________________
   ________________________________________________________________________________
   ____________________         _____________________
   Signature                                                  Date

d. Office Head Determination (check one block only)
   1. † Request for exigency Approved (Employee's annual leave cancelled or disapproved)
   2. † Request Disapproved
   ____________________     _____________________
   Signature of Office Head                        Date
   __________________________________________________________________________________
   __________________________________________________________________________________

Part II. Annual Leave Restoration Request (to be made after last day of leave year)

I request that
___________
hours of annual leave forfeited due to the above
documented exigency be restored.

_______________________________
_____________________
Signature of Employee                             Date
   ___________________________________________________________________________________
   ___________________________________________________________________________________

Part III. Approved:

_________________________________           ____________________
Human Resources Officer                                     Date

Privacy Act Statement
Section 6311 of title 5, United States Code, authorizes collection of this information. The primary use of this information is by
management and your payroll office to approve and record your use of leave. Additional disclosures of the information may be: To the
Department of Labor when processing a claim for compensation regarding a job connected injury or illness; to a State unemployment
compensation office regarding a claim; to Federal Life Insurance or Health Benefits carriers regarding a claim; to a Federal, State, or
local law enforcement agency when your agency becomes aware of a violation or possible violation of civil or criminal law; to a Federal
agency when conducting an investigation for employment or security reasons; to the Office of Personnel Management or the General
Accounting Office when the information is required for evaluation of leave administration; or the General Services Administration in
connection with its responsibilities for records management.

Public Law 104-134 (April 26, 1996) requires that any person doing business with the Federal Government furnish a social security
number or tax identification number. This is an amendment to title 31, Section 7701. Furnishing the social security number, as well as
other data, is voluntary, but failure to do so may delay or prevent action on the application. If your agency uses the information furnished
on this form for purposes other than those indicated above, it may provide you with an additional statement reflecting those purposes.
## Application for Restoration of Annual Leave

**Instructions:** This form is to be used for all requests for restoration of annual leave. Each section of this form must be completed thoroughly or the request will be considered incomplete.

1. **Year Leave Was Forfeited:**

2. **Basis of Request** (See reverse for definitions):
   - [ ] Exigency of the Service
   - [ ] Illness or Injury
   - [ ] Administrative Error

3. **Employee’s Name** (Last, First, Initial):

4. **Employee’s SSN:**

5. **Hours Forfeited:**

6. **Hours Requested for Restoration:**

7. **Position Title, Series and Grade** (i.e., Office Automation Clerk, GS-0326-05):

8. **T&A Cost Structure Code:**

9. **Section, Office, Branch, Agency, Region** (i.e., Title Examination Unit, LTRO Section, Branch of Trust Services, Southern Plains Regional Office):

10. **Office Telephone Number:**

11. **Reason for Request** (Provide specific details on the nature of the exigency or illness and the reasons why leave could not be rescheduled and used; or the nature of the error, the date it was discovered, and a summary reconstruction of the employee’s leave record. For additional space, attach a statement to this form):

12. **Requesting Employee**

<table>
<thead>
<tr>
<th>Signature:</th>
<th>Date:</th>
</tr>
</thead>
</table>

13. Dates leave was not used because it was disapproved or cancelled. Except for cases of administrative error, provide the following information for each instance of scheduled annual leave that was not used and attach copies of the documents, including the original OPM-71, on which the leave was requested and approved.

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Date</th>
<th>Time</th>
<th>Number of Hours</th>
<th>Date of Approval</th>
<th>Date of Leave Cancellation</th>
</tr>
</thead>
</table>

14. **Immediate Supervisor**

   | [ ] Recommend Approval | [ ] Recommend Disapproval | Signature and Title: | Date: |

15. **Bureau HR Officer**

   | [ ] Recommend Approval | [ ] Recommend Disapproval | Signature and Title: | Date: |

16. **Approving Official** (See reverse of this form)

   | [ ] Approved | [ ] Disapproved | Signature and Title: | Date: |

**Privacy Act Notice:** The information requested on this form is authorized by 5 USC 6311. Its purpose is to support and document requests and approvals of restoration of annual leave. The disclosure of the information is voluntary. Non-disclosure of the information may result in disapproval of the request.

Distribute copies to the Restored Leave File, Human Resources Manager, and the Employee
APPROVING OFFICIAL

Deputy Assistant Secretaries, Bureau Directors, or their Deputies may approve the restoration of leave which was forfeited as a result of illness, administrative error, or an exigency to service. If an approving official has a personal interest in the leave restoration decision or might benefit from the decision, the decision shall be made by a higher level authority.

CONDITIONS MERITING LEAVE RESTORATION

Illness – Annual leave which was forfeited may be restored when an illness (or other personal health condition for which sick leave was approved) occurs or lasts so late in the leave year that it is impossible for the employee to use scheduled leave. Discretionary surgery or other situation which could have been foreseen and leave scheduled to accommodate it, is not grounds for leave restoration.

Exigency of the Public Business – An exigency of the public business may be said to exist when circumstances are beyond the control of the employee(s) affected, and the exigency could not have been reasonably anticipated. A sudden call to jury duty or military duty or a project becoming suddenly visible politically or reaching a critical stage at year’s end are examples of an exigency of the public business. If other employees can be substituted for those who forfeit leave, an exigency does not exist.

Administrative Error – Leave may be restored when it is forfeited as a result of incorrect leave category assignment, an improper determination of creditable service, failure of a supervisor to act timely on a request for leave, or other administrative error.

SCHEDULING RESTORED LEAVE

Annual leave which is restored based on exigency of the service, administrative error, or illness must be credited to a separate account and used no later than the end of the leave year which ends two years after the date the exigency terminated; the leave was restored; or the employee was determined to be fit to return to work, etc. For example, annual leave that was restored in February 1994 has to be used before the 1996 leave year ends.

DISTRIBUTION OF THIS FORM

The form and accompanying documents must be forwarded to the Servicing Human Resources Office. The Human Resources Office will submit the necessary information to the payroll office so that restored hours can be entered into the Personnel/Payroll System.
### Application to Become a Leave Recipient
#### Under the Voluntary Leave Transfer Program

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Applicant's name <em>(Last, first, middle)</em></td>
<td>2. Social Security Number</td>
<td>3. Employee Number</td>
</tr>
<tr>
<td>4a. Position title</td>
<td>4b. Pay plan</td>
<td>4c. Grade/pay level</td>
</tr>
<tr>
<td>5. Name of organization <em>(Agency, Department, Office, Division, Branch, etc.)</em></td>
<td>6. Office telephone number</td>
<td></td>
</tr>
<tr>
<td>7. Nature and severity of the medical emergency</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Individual affected by medical emergency <em>(check one)</em></td>
<td>9. Date medical emergency began</td>
<td>10. Date medical emergency ended <em>(or is expected to end)</em></td>
</tr>
<tr>
<td>- Employee</td>
<td>- Employee's family member</td>
<td></td>
</tr>
<tr>
<td>11. Name of physician who will verify the medical emergency. <em>(Attach documentation from the physician (or other appropriate expert) showing the diagnosis, prognosis and duration of illness.)</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12. What is the applicant's annual and sick leave balances as of end of last pay period?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Annual leave balance</td>
<td>Sick leave balance</td>
<td></td>
</tr>
<tr>
<td>13. How many hours of leave without pay have been used for this medical emergency?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hours</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14. Provide a description of the medical emergency to be distributed to servicing personnel offices so that other employees may donate annual leave to the applicant.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Description of medical emergency</td>
<td></td>
<td></td>
</tr>
<tr>
<td>15a. Name of individual completing application <em>(If applying on behalf of the applicant)</em></td>
<td>15b. Relationship to applicant</td>
<td>15c. Telephone number (area code)</td>
</tr>
<tr>
<td>16a. I certify that the above statements are true. <em>(Signature of applicant or individual applying on behalf of applicant)</em></td>
<td>16b. Date signed</td>
<td></td>
</tr>
</tbody>
</table>

### Privacy Act Statement
Participation in this program is voluntary; however, solicitation of this information is authorized under 5 U.S.C. 6332. The information furnished will be used to identify records properly associated with the transfer of annual leave. It may also be disclosed to a national, State, or local law enforcement agency where there is an indication of a violation or potential violation of civil or criminal law, rule, or regulation; or to another agency or court when the Government is party to a suit. Public Law 104-134 (April 26, 1996) requires that any person doing business with the Federal Government furnish a social security number or tax identification number. This is an amendment to title 31, Section 7701. Furnishing the social security number, as well as other data, is voluntary, but failure to do so may delay or prevent action on the application. If your agency uses the information furnished on this form for purposes other than those indicated above, it may provide you with an additional statement reflecting those purposes.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>17. First level supervisor's recommendation</td>
<td>18. Deciding official's decision</td>
</tr>
<tr>
<td>- Approve</td>
<td>- Approve</td>
</tr>
<tr>
<td>- Disapprove</td>
<td>- Disapprove</td>
</tr>
<tr>
<td>Signature</td>
<td>Signature</td>
</tr>
<tr>
<td>Date signed</td>
<td>Date signed</td>
</tr>
</tbody>
</table>
Appendix I

Request to Donate Annual Leave to Leave Recipient
Under the Voluntary Leave Transfer Program

I request that annual leave be transferred to the leave account of an approved leave recipient. This recipient is not my immediate supervisor. As of the date indicated below, I have enough annual leave in my account to cover this amount. I understand that if I am projected to forfeit annual leave during this leave year, the amount of leave I am transferring may not exceed the number of hours remaining in the leave year for which I am scheduled to work. The amount of annual leave I am transferring also is not more than half the hours I will earn this year.

I understand that my decision to transfer leave is not revocable. If a sufficient balance of unused leave remains after the recipient's medical emergency has terminated, I can elect to have a pro-rated share returned to me during either the current leave year or the following leave year, or I can elect to donate my pro-rated share to another leave recipient. However, to do so, I must remain employed by a Federal agency and be subject to chapter 63 of title 5, United States Code.

I have not been directly or indirectly intimidated, threatened or coerced, or promised any benefit by any employee for the purpose of donating or using leave.

---

**To Be Completed By Leave Donor**

<table>
<thead>
<tr>
<th>1. Name <em>(Last, first, middle)</em></th>
<th>2. Social Security Number</th>
<th>3. Employee Number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4a. Position title</th>
<th>4b. Pay plan</th>
<th>4c. Grade/pay level</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>5a. Name of organization <em>(Agency, Department, Office, Division, Branch, etc.)</em></th>
<th>5b. Office telephone number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>6. Amount of annual leave accrued as of end of last pay period</th>
<th>7. Amount of leave projected to forfeit this leave year as of end of last pay period</th>
<th>8. Amount of annual leave to be transferred</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>9. Individual's name or identification number to whom leave is being donated</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>10a. Signature</th>
<th>10b. Date signed</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

---

**Privacy Act Statement**

Participation in this program is voluntary; however, solicitation of this information is authorized under 5 U.S.C 6332. The information furnished will be used to identify records properly associated with the transfer of annual leave. It may also be disclosed to a national, State, or local law enforcement agency where there is an indication of a violation or potential violation of civil or criminal law, rule, or regulation; or to another agency or court when the Government is party to a suit. Public Law 104-134 (April 26, 1996) requires that any person doing business with the Federal Government furnish a social security number or tax identification number. This is an amendment to title 31, Section 7701. Furnishing the social security number, as well as other data, is voluntary, but failure to do so may delay or prevent action on the application. If your agency uses the information furnished on this form for purposes other than those indicated above, it may provide you with an additional statement reflecting those purposes.
Request to Donate Annual Leave to Leave Recipient
Under the Voluntary Leave Transfer Program

I request that annual leave be transferred to the leave account of an approved leave recipient. This recipient is not my immediate supervisor. As of the date indicated below, I have enough annual leave in my account to cover this amount. I understand that if I am projected to forfeit annual leave during this leave year, the amount of leave I am transferring may not exceed the number of hours remaining in the leave year for which I am scheduled to work. The amount of annual leave I am transferring also is not more than half the hours I will earn this year.

I understand that my decision to transfer leave is not revocable. If a sufficient balance of unused donated leave remains after the recipient's medical emergency has terminated, I can elect to have a pro-rated share returned to me during either the current leave year or the following leave year, or I can elect to donate my pro-rated share to another leave recipient. However, to do so, I must remain employed by a Federal agency and be subject to chapter 63 of title 5, United States Code. I have not been directly or indirectly intimidated, threatened or coerced, or promised any benefit by any employee for the purpose of donating or using leave.

**Part A - To Be Completed By Leave Donor**

<table>
<thead>
<tr>
<th>1. Name <em>(Last, first, middle)</em></th>
<th>2. Social Security Number</th>
<th>3. Employee Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>4a. Position title</td>
<td>4b. Pay plan</td>
<td>4c. Grade/pay level</td>
</tr>
<tr>
<td>5. Relationship of leave donor to leave recipient <em>(if any)</em></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

6. Leave donor's agency *(Agency, Department, Office, Division, Branch, etc.)*

| 7. Amount of annual leave accrued as of end of last pay period | 8. Amount of leave projected to forfeit this leave year as of end of last pay period | 9. Amount of annual leave to be transferred |

10. Leave recipient's name, agency, agency's address, organization *(Agency, Department, Office, Division, Branch, etc.)*

11a. Leave donor's signature | 11b. Date signed |

**Privacy Act Statement**
Participation in this program is voluntary; however, solicitation of this information is authorized under 5 U.S.C 6332. The information furnished will be used to identify records properly associated with the transfer of annual leave. It may also be disclosed to a national, State, or local law enforcement agency where there is an indication of a violation or potential violation of civil or criminal law, rule, or regulation; or to another agency or court when the Government is party to a suit. Public Law 104-134 (April 26, 1996) requires that any person doing business with the Federal Government furnish a social security number or tax identification number. This is an amendment to title 31, Section 7701. Furnishing the social security number, as well as other data, is voluntary, but failure to do so may delay or prevent action on the application. If your agency uses the information furnished on this form for purposes other than those indicated above, it may provide you with an additional statement reflecting those purposes.

**Part B - To Be Completed By Employing Agency of Leave Donor**

Upon completion and approval of this form, forward a copy to the leave recipient's employing agency as soon as possible so that the transfer of leave can take place.

| 12. Enter the amount of annual leave to be credited to the leave recipient's annual leave account | 13. If the agency is waiving the maximum limitations for leave donation under the voluntary leave transfer program, describe the special circumstance that warrants the waiver |
| 14a. Name of agency contact who can provide further information | 14b. Telephone number |

15. Certification: I certify that the leave donor currently has sufficient annual leave in his/her annual leave account to make a donation of the requested amount of annual leave and that the amount of the donation does not exceed the maximum limitations for leave donation under the voluntary leave transfer program.

15a. Signature of authorizing official | 15b. Date Signed |
Appendix K

Certification of Health Care Provider
(Family and Medical Leave Act of 1993)

U.S. Department of Labor
Employment Standards Administration
Wage and Hour Division

(Written completed, this form goes to the employee, *Not to the Department of Labor.*)

1. Employee's Name          2. Patient's Name (If different from employee)

3. Page 4 describes what is meant by a "serious health condition" under the Family and Medical Leave Act. Does the patient's condition qualify under any of the categories described? If so, please check the applicable category.
   (1)      (2)      (3)      (4)      (5)      (6)      , or None of the above

4. Describe the medical facts which support your certification, including a brief statement as to how the medical facts meet the criteria of one of these categories:

5. a. State the approximate date the condition commenced, and the probable duration of the condition (and also the probable duration of the patient's present incapacity if different):

   b. Will it be necessary for the employee to take work only intermittently or to work on a less than full schedule as a result of the condition (including for treatment described in Item 6 below)?

   If yes, give the probable duration:

   c. If the condition is a chronic condition (condition #4) or pregnancy, state whether the patient is presently incapacitated and the likely duration and frequency of episodes of incapacity:

---

1 Here and elsewhere on this form, the information sought relates only to the condition for which the employee is taking FMLA leave.

2 "Incapacity," for purposes of FMLA, is defined to mean inability to work, attend school or perform other regular daily activities due to the serious health condition, treatment therefor, or recovery therefrom.
Appendix K

6. a. If additional treatments will be required for the condition, provide an estimate of the probable number of such treatments.

If the patient will be absent from work or other daily activities because of treatment on an intermittent or part-time basis, also provide an estimate of the probable number of and interval between such treatments, actual or estimated dates of treatment if known, and period required for recovery if any:

b. If any of these treatments will be provided by another provider of health services (e.g., physical therapist), please state the nature of the treatments:

c. If a regimen of continuing treatment by the patient is required under your supervision, provide a general description of such regimen (e.g., prescription drugs, physical therapy requiring special equipment):

7. a. If medical leave is required for the employee’s absence from work because of the employee’s own condition (including absences due to pregnancy or a chronic condition), is the employee unable to perform work of any kind?

b. If able to perform some work, is the employee unable to perform any one or more of the essential functions of the employee’s job (the employee or the employer should supply you with information about the essential job functions)? If yes, please list the essential functions the employee is unable to perform:

c. If neither a. nor b. applies, is it necessary for the employee to be absent from work for treatment?
8. a. If leave is required to care for a family member of the employee with a serious health condition, does the patient require assistance for basic medical or personal needs or safety, or for transportation?

b. If no, would the employee's presence to provide psychological comfort be beneficial to the patient or assist in the patient's recovery?

c. If the patient will need care only intermittently or on a part-time basis, please indicate the probable duration of this need:

________________________________________
Signature of Health Care Provider

________________________________________
Address

________________________________________
Type of Practice

________________________________________
Telephone Number

________________________________________
Date

To be completed by the employee needing family leave to care for a family member:

State the care you will provide and an estimate of the period during which care will be provided, including a schedule if leave is to be taken intermittently or if it will be necessary for you to work less than a full schedule:

________________________________________
Employee Signature

________________________________________
Date
A “Serious Health Condition” means an illness, injury impairment, or physical or mental condition that involves one of the following:

1. Hospital Care
   
   Inpatient care (i.e., an overnight stay) in a hospital, hospice, or residential medical care facility, including any period of incapacity\(^2\) or subsequent treatment in connection with or consequent to such inpatient care.

2. Absence Plus Treatment
   
   (a) A period of incapacity\(^2\) of more than three consecutive calendar days (including any subsequent treatment or period of incapacity\(^2\) relating to the same condition), that also involves:
      
      (1) Treatment\(^3\) two or more times by a health care provider, by a nurse or physician’s assistant under direct supervision of a health care provider, or by a provider of health care services (e.g., physical therapist) under orders of, or on referral by, a health care provider; or
      
      (2) Treatment by a health care provider on at least one occasion which results in a regimen of continuing treatment\(^4\) under the supervision of the health care provider.

3. Pregnancy
   
   Any period of incapacity due to pregnancy, or for prenatal care.

4. Chronic Conditions Requiring Treatments
   
   A chronic condition which:
      
      (1) Requires periodic visits for treatment by a health care provider, or by a nurse or physician's assistant under direct supervision of a health care provider;
      
      (2) Continues over an extended period of time (including recurring episodes of a single underlying condition); and
      
      (3) May cause episodic rather than a continuing period of incapacity\(^2\) (e.g., asthma, diabetes, epilepsy, etc.).

5. Permanent/Long-term Conditions Requiring Supervision
   
   A period of Incapacity\(^2\) which is permanent or long-term due to a condition for which treatment may not be effective. The employee or family member must be under the continuing supervision of, but need not be receiving active treatment by, a health care provider. Examples include Alzheimer's, a severe stroke, or the terminal stages of a disease.

6. Multiple Treatments (Non-Chronic Conditions)
   
   Any period of absence to receive multiple treatments (including any period of recovery therefrom) by a health care provider or by a provider of health care services under orders of, or on referral by, a health care provider, either for restorative surgery after an accident or other injury, or for a condition that would likely result in a period of Incapacity\(^2\) of more than three consecutive calendar days in the absence of medical intervention or treatment, such as cancer (chemotherapy, radiation, etc.), severe arthritis (physical therapy), and kidney disease (dialysis).

This optional form may be used by employees to satisfy a mandatory requirement to furnish a medical certification (when requested) from a health care provider, including second or third opinions and recertification (29 CFR 825.306).

Note: Persons are not required to respond to this collection of information unless it displays a currently valid OMB control number.

\(^3\) Treatment includes examinations to determine if a serious health condition exists and evaluations of the condition. Treatment does not include routine physical examinations, eye examinations, or dental examinations.

\(^4\) A regimen of continuing treatment includes, for example, a course of prescription medication (e.g., an antibiotic) or therapy requiring special equipment to resolve or alleviate the health condition. A regimen of treatment does not include the taking of over-the-counter medications such as aspirin, antihistamines, or salves; or bed-rest, drinking fluids, exercise, and other similar activities that can be initiated without a visit to a health care provider.

Public Burden Statement

We estimate that it will take an average of 20 minutes to complete this collection of information, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, Department of Labor, Room S-3502, 200 Constitution Avenue, N.W., Washington, D.C. 20210.

DO NOT SEND THE COMPLETED FORM TO THIS OFFICE; IT GOES TO THE EMPLOYEE.