Kean University - Sick Leave Request Form

For Students Employees & Academic Specialists

Employee Name _____ ID # _____

Employee Email _____ Dept/Unit _____

Dates and/or Time off requested _____

Acceptable Reasons to Use Earned Sick Leave:

- You need diagnosis, care, treatment, or recovery for a mental or physical illness, injury, or health condition; or you need preventive medical care.
- You need to care for a family member during diagnosis, care, treatment, or recovery for a mental or physical illness, injury, or health condition; or your family member needs preventive medical care.
- You or a family member have been the victim of domestic violence or sexual violence and need time for treatment, counseling, or to prepare for legal proceedings.
- You need to attend school-related conferences, meetings, or events regarding your child's education; or to attend a school-related meeting regarding your child's health.
- Your employer's business closes due to a public health emergency or you need to care for a child whose school or child care provider closed due to a public health emergency.

I am requesting to use my earned sick leave for one of the acceptable reasons listed above.

Employee Signature _____ Date: _____

For further details regarding sick leave, you may consult with your supervisor/manager or refer to the Kean University Sick Leave Guidelines for Student Employees and Academic Specialists. You may also contact Megan Robinson (908-737-3315 or merobins@kean.edu) in the Office of Human Resources.

- ☐ Request Approved
- ☐ Request Denied

_____

Supervisor/Manager Name

_____ _____

Supervisor/Manager Signature Date