



MATERNITY/PARENTAL/ADOPTIVE LEAVE APPLICATION

Employees must be employed by Frontier School Division for seven (7) consecutive months prior to the effective date of the leave to be eligible.

EMPLOYEE INFORMATION		
LAST NAME	FIRST NAME	MIDDLE INITIAL
SCHOOL/LOCATION		
POSITION		

LEAVE OPTIONS		
<p>The employee shall provide confirmation from Service Canada with respect to the EI benefit amount, including effective dates, in order for the Division to calculate and process top-up benefits.</p>		
<i>Please complete the applicable section(s):</i>	START DATE MM/DD/YY	END DATE MM/DD/YY
MATERNITY/PARENTAL LEAVE <i>(up to 17 weeks maternity leave and 63 weeks parental leave, including waiting period)</i>		
<p>Support Staff only – please indicate your Plan option: Plan A (No Top-Up) <input type="checkbox"/> Plan B (Top-Up) <input type="checkbox"/></p> <p><i>Employees applying for Plan B agree to return to work for at least six (6) months following the maternity/parental leave. If the employee fails to return to work, the gross pay received from the Division as a top-up shall be repaid in full.</i></p>		
PARENTAL LEAVE ONLY <i>(up to 63 weeks, including waiting period, if applicable)</i>		
ADOPTIVE LEAVE ONLY <i>(up to 63 weeks, including waiting period)</i>		

For more information regarding these leaves, please refer to the Frontier School Division website:

- Support Staff - See Division Policy E.3.A – Maternity Leave and/or E.3.B – Parental-Adoption Leave
- Teaching Staff - See Collective Agreement between Frontier School Division & Frontier Teachers' Association

This form cannot be processed without the following signatures

EMPLOYEE SIGNATURE:		DATE:	
PRINCIPAL/SUPERVISOR SIGNATURE:		DATE:	
SUPERINTENDENT SIGNATURE:		DATE:	

Area Office/Superintendent – Please submit completed form, no less than four (4) weeks prior to the start of the leave, along with a medical certificate indicating estimated due date to the Human Resources Department Fax – 204-258-2068