



REQUEST FOR 3.4 ADVANCED SICK LEAVE

Instructions:

- Eligible permanent civil service status, held with NYC H+H, employees to fill out form below in its entirety and must submit form along with current medical documentation validating absence and diagnosis to HRSS Leave Administration at HRSSLeaveAdministration@nychhc.org.
- Group 11 titles are also eligible.
- Eligible employee must be employed with NYC H+H (ODA) for one calendar year or more.
- This advancement of unearned sick leave will run concurrent with FMLA and other eligible leaves, as applicable.
- This is a discretionary advancement of sick leave, and as such, this additional leave time will be recuperated upon employee return to duty.

To Be Completed/Requested by the Employee

Employee Last Name, First Name:	Employee PeopleSoft ID #:
Employee Email:	Contact Telephone #:

I am a permanent employee (required for Group 12 only):	<input type="checkbox"/> Yes <input type="checkbox"/> No
I have been employed by NYC H+H for one (1) year or more:	<input type="checkbox"/> Yes <input type="checkbox"/> No
My H+H Original Date of Appointment (HHC ODA) is:	____/____/____
My last day of work at NYCH+H was:	____/____/____

_____	____/____/____
Employee Signature	Date

To Be Completed by HRSS Leave Administration ONLY

Date received by HRSS Leave Administration	____/____/____
HRSS Leave Administrator (Last Name, First Name)	
Employee is a permanent employee (required for Group 12 only)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Employee has been by NYC H+H for one (1) year or more	<input type="checkbox"/> Yes <input type="checkbox"/> No
Employee H+H Original Date of Appointment is	____/____/____
<input type="checkbox"/> 3.4 Request Approved on ____/____/____	<input type="checkbox"/> 3.4 Request Denied on ____/____/____