

Absence request for immigration enforcement action

(For campus only)

Instructions

Please use this form to request a continuous leave of absence from work, intermittent time off, or a temporarily reduced work schedule if your absence is due to your involvement or your relative or household member in an immigration enforcement action. Immigration enforcement action includes but is not limited to:

- detention,
- the preparation for or participation in any judicial or administrative immigration proceeding,
- deportation,
- or any other hardship due to family separation caused by these actions.

In requesting this absence, please do not disclose any personally identifiable information about the impacted person's immigration status or underlying immigration protection.

Return the completed form to:

Campus HR Operations and Services
4320 Brooklyn Ave NE
Box 354963
Seattle, WA 98195-4963
Fax: (206) 685-0636
Email: hrleaves@uw.edu

Do not submit this form to your unit or department.

Employee Information

1. Employee name:
2. Employee ID:
3. Department:
4. Manager:
5. Please identify your relationship to the impacted individual:
 Self Family or household member

6. If the impacted individual is a family or household member, please describe the relationship to you:

- | | | | |
|-------------------------------------|--|---|--------------------------------|
| <input type="checkbox"/> Parent | <input type="checkbox"/> Parent-in-law | <input type="checkbox"/> Spouse or domestic partner | <input type="checkbox"/> Child |
| <input type="checkbox"/> Grandchild | <input type="checkbox"/> Grandparent | <input type="checkbox"/> Household member | <input type="checkbox"/> Other |

Leave request information

1. I am requesting a continuous leave of absence from work:

- Yes No

2. Start date: End date:

3. I am requesting a reduced work schedule as follows: _____ hours per day for _____ days per week, until _____ end date.

4. I am requesting an intermittent work schedule: Yes No

5. If yes, describe the request schedule:

6. For time off accruing employees only. I am requesting shared leave:

- Yes No

7. I need an alternative arrangement for receiving paychecks:

- Yes No

8. How can your manager communicate with you during your absence?

Verification statement or documentation

Please provide verification that you or your relative or household member is involved in an immigration enforcement action and that the leave taken is because of an immigration enforcement action.

Verification may also be provided by submitting documentation that you or your relative or household member is involved in an immigration enforcement action from any of the following people from whom assistance has been sought in addressing the immigration enforcement action:

- An advocate for immigrants or refugees,
- an attorney,
- a member of the clergy, or any other professional.

I am submitting one or more of the documents described above instead of providing a written statement.

Employee signature

Signature:

Date: