I. Purpose/Introduction/Rationale
The purpose of this procedure is to define the steps to be taken in order to take time off with and without pay in the event of the death of a family member.

II. Definition
This procedure applies to all staff who are scheduled to work at least 1,000 hours. For the purposes of this policy, immediate family members, in-laws and stepfamily members of the employee are defined as follows: spouse, parents, grandparents, son, daughter, sister, brother and grandchildren.

III. Procedure or Application
A. An employee may be given time off of up to three (3) days in-state and five (5) days out-of-state without loss of pay to make arrangements for, or to attend the funeral of a family member.

B. The supervisor may grant an additional period of time, not to exceed three (3) days, if it is necessary due to circumstances, distances to be traveled, etc. The supervisor will provide a written notice of the additional time period with the reason for the request to the Human Resources Department. This additional time off would be charged to Paid Time Off (PTO) or taken on a non-paid basis.

C. These time limits are maximum amounts to be taken and should not be considered automatic.

D. An employee may attend the funeral of an individual who is not immediate family member utilizing either PTO or on a non-paid basis subject to supervisory approval.

E. The employee is responsible for notifying the immediate supervisor of the bereavement in a timely fashion and for indicating the expected time of absence.

F. The supervisor will notify the Payroll Department of the status of leave that will be included with the appropriate time sheet or time card.

G. This paid bereavement leave does not apply if the death occurs while the employee is on a paid or unpaid leave of absence, PTO, salary continuation or long term disability.

H. The supervisor reserves the right to request a copy of the death certificate.
IV. Related Policies or Applicable Publications
See also: Paid Time Off (PTO) – Staff Policy

V. Appendices/Supplemental Materials
N/A

VI. Rationale for Revision
N/A