1. Establish Eligibility: To be eligible for up to 12 weeks of Family and Medical Leave (FMLA leave), the employee must have:

   a) worked for the employer for at least 12 months.

   b) worked for the employer for at least 1,250 hours over the previous 12 months (approximately 22 hours per week).

   c) worked at a location where at least 50 employees are employed by the employer within 75 miles. FMLA regulations include special rules regarding length of leave, if a husband and wife work for the same employer.
2. Requirements: In addition to submitting the NIC leave request form, employees are required to:

   a) give the college 30 calendar days notice of the need for leave when it is foreseeable.
   
   b) use all compensatory time before going on leave without pay.
   
   c) obtain medical certification of serious health conditions using the U.S. Department of Labor form available at the Human Resources office.
   
   d) pay their share of the insurance premiums for the medical/dental/vision plans. The employer is obligated to maintain the employee's health insurance benefits during a period of FMLA leave. If the employee does not pay his/her portion of the insurance premiums and the employee is then dropped from coverage, the employee may regain coverage upon returning to work, provided the employee re-enrolls within 30 days of returning to work. If the employee does not return from leave, the college has the right to retrieve the college's contributions to the employee's insurance for the period of unpaid leave.

   e) schedule treatment of a serious health condition to avoid undue disruption of their normal work.

   f) provide periodic reports on health status and their intentions with regard to returning to work.

   g) provide certification of fitness-to-return-to-work prior to returning to work if the leave was for their own medical condition.

3. Response to Requests for FMLA Leave: The North Idaho College Human Resources Office will respond to the employee's request for FMLA leave via the U.S. Department of Labor form WH-381 titled Employer Response to Employee Request for Family or Medical Leave, or a similar document. The response will also include the Absence Form submitted regarding the requested leave.