

	Montana Mental Health Nursing Care Center Policy Manual	Policy Number	408
		Original Date	02/26/1986
	Department: Personnel	Revised Date	01/09/2014
	Leave of Absence Without Pay		

POLICY:

The Montana Mental Health Nursing Care Center will authorize requested leave of absence without pay consistent with the Department of Public Health & Human Services policy number 230 (Attachment #1) and Montana Operations Manual Policy 3-0330, (Attachment #2) based on the merits of each request.

PROCEDURE:

1. An authorized leave of absence without pay generally will not be approved until all other appropriate earned leave has been exhausted.
 - A. Authorized leave without pay will be requested in advance except in extenuating circumstances and shall be based on the needs of the agency, the reason for request and the employees work record.
 - B. When leave without pay is granted for medical illness, including disability leave, all available sick leave and/or compensatory time must be used prior to being granted leave without pay, excluding new employees with less than three (3) months employment. A supervisor may not require the employee to use annual leave.
 - C. Leave Without Pay, will be requested using the Employee Request Form.
 - D. If for a medical reason an employee on a disability leave cannot return to work on the agreed upon date, he/she must furnish a physician statement verifying the medical need for the extension.

2. For unauthorized absences from the work place employees may be placed in an unpaid status for the duration of the absence.
 - A. Leave without pay or other discipline may be assessed for employees who are late for work, do not report for a scheduled shift, leave work without permission, or any other appropriate reason.

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- B. The employee will complete the Department of Public Health & Human Services Employee Request Form indicating the reason for the absence and sign it in the appropriate block. The supervisor will mark "not approved" in the supervisor signature block section, state the reason for not approving the leave without pay, and initial the supervisor signature block.

- 3. In no case will employees be allowed to mix other leave and leave without pay. Example: 2 days annual, 2 days leave without pay, 2 days annual, etc. Use of leave without pay must be continuous for the time period approved.

- 4. The Employee Request Forms requesting leave without pay must be signed by the appropriate Department Supervisor or the Superintendent. Supervisors authorized to sign for their employees are:

Director of Support Services; Director of Nursing; Superintendent

- 5. This policy will be administered in compliance with the Montana Operating Manual Policy Number 3-0330.