New Canaan Education Association

Family Leave Request Format

Date

Darlene Pianka, Director of Human Resources New Canaan Public Schools 39 Locust Avenue New Canaan, CT 06840

Dear Ms. Pianka:

This will serve to notify you that I anticipate the birth of my baby on/or about _Date_. My doctor anticipates that my period of disability will commence on or about _Date_. In the event of any changes in the anticipated delivery date, I will provide updates as may be needed. It is my intention to use my accumulated sick leave while I am disabled.

I will use the maximum amount of leave time pursuant to the Family and Medical Leave Act (FMLA), I anticipate that I will return to my teaching position on _Date_.

Thank you for your consideration in this matter.

Sincerely,

Your name

cc: Immediate Supervisor, Title (Building Principal or Department Head)