

SAMPSON COUNTY FMLA GUIDELINES

Please refer to: Sampson County Personnel Resolution Article VI, Sections 30-36

Department of Labor Website: <https://www.dol.gov/whd/fmla/employeeguide.pdf>

1. Employee requests Family Medical Leave: Employee or supervisor contacts Patty Jackson at the Human Resource Department, (910) 592-6308 ext. 2253 or via email @ pjackson@sampsonnc.com and request Family Medical Leave forms.
2. The Human Resource Department will provide the employee with Form WH-381 (“Notice of Eligibility and Rights & Responsibilities”). If the employee is eligible, HR will provide the employee with needed documents to process FMLA. (The reason for requesting FMLA will determine the documents provided).
3. The employee has **15 Calendar Days** to return completed forms to HR. The Department of Labor has all forms necessary to request FMLA.
 - a. Form WH-380-E Certification of Health Care Provider for Employee’s Serious Health Condition (Medical Leave requested for self – includes illness and maternity leave).
 - b. Form WH-380-F Certification of Health Care Provider for Family Member’s Serious Health Condition (Medical Leave requested for family member – Includes only spouse, son, daughter, mother or father).
 - c. Form WH-385 Certification for Serious Injury or Illness of a Current Service member-for-Military Family Leave. (Up to 26 weeks for Family Member – includes only spouse, son, daughter or next of kin).
 - d. Form WH-385-V Certification for Serious Injury or Illness of a Veteran Military Caregiver Leave. (Family Member – includes only spouse, son, daughter or next of kin).
 - e. Form WH-384-R Certification of Qualifying Exigency for Military Leave (Family Member – includes only spouse, son, daughter, or parent who is a member of the Armed Forces “including National Guard and Reserves” and is on covered active duty or has been notified of an impending call or order to covered active duty).
4. When completed forms are received in HR, they will be reviewed to ensure accuracy and forwarded to the County Manager for Approval or Disapproval.
If forms are incomplete, HR will send Form WH-382 (within **5 Business Days**) to the employee with specific instructions for what is needed to make the certification complete and sufficient. The employee is given **7 Calendar Days** to provide the additional information requested.
5. When forms are returned to HR, a Designation Notice (Form WH-382) will be completed to notify the employee of the County Manager’s decision. HR must provide the employee with Form WH-382 within **5 Business Days**.
6. If FMLA is approved, HR must advise the employee if a “Fitness for Duty” Certification will be required. **ALL** employees out on FMLA (**self**) will be required to submit certification

form their health care provider that they are able to resume work. (A Certification form will be given to employee with Form WH-382)

NOTE: The Sampson County FMLA time period is measured forward from the date any employee's first FMLA begins.

Department Heads may keep copies of records and documents relating to an employee's FMLA application; however, these records are considered **Confidential Medical Records**, and must be kept separate from the records/personnel file.