

**Paternity Leave Letter for Board Approval**

(letter must be provided no later than 120 days before the anticipated date of birth)

Date: \_\_\_\_\_

To: Mr. Michael Adams, Superintendent  
Haddon Heights Board of Education

From: \_\_\_\_\_ Signature: \_\_\_\_\_

Attached please find a doctor's note confirming my wife's pregnancy and that the baby is due on \_\_\_\_\_

I am requesting to use the following days:

\_\_\_\_\_ # of Personal days                      Dates: \_\_\_\_\_

\_\_\_\_\_ # of Family Leave days                      Dates: \_\_\_\_\_  
(FMLA allows up to 12 weeks including weekends and holidays)

\_\_\_\_\_ Return to Work                      Date: \_\_\_\_\_

During the family leave period you will receive **NO** pay from the Haddon Heights School District but health coverage will remain in effect. Should you choose to continue your health benefits through Haddon Heights Board of Education during your 12 week FMLA, the state-mandated health contribution is your responsibility. You may file for NJ family leave using the enclosed forms. Debbie Heller will complete Part D of this packet and mail it to you. You then complete the remaining forms and mail everything together directly to the state. Please refer to the Family Leave Insurance Website at <http://lwd.dol.state.nj.us/labor/fli/fliindex.html> for more information.

I agree to pay all applicable state-mandated health contributions to the Haddon Heights Board of Education while on FMLA. \_\_\_\_\_ (please initial)

Additional information: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I also understand that if I am a non-tenured teacher, my absence may not be extended beyond the end of the contract school year in which the leave is obtained.

**For Office Use Only:**

Prorated entitled days: Sick: \_\_\_\_\_ Personal: \_\_\_\_\_  
(subject to change)

Board Approval Date: \_\_\_\_\_ FT/PT: \_\_\_\_\_ Tenured/Non-Tenured: \_\_\_\_\_

Baby's Actual Birthdate: \_\_\_\_\_ Dr.'s note: \_\_\_\_\_ School: \_\_\_\_\_

Health Contribution Amount \_\_\_\_\_ per month \_\_\_\_\_