TITLE	APPROVAL DATE
Bereavement Leave	5/5/1988
SECTION	REVISION DATE
Time Off/Leaves of Absence	8/15/1995

Regular Status Employees who work a minimum of 50% Full Time Equivalency are eligible to request three (3) regularly scheduled work shifts of leave with pay upon the death of an immediate family member.

Notification

The employee should notify the Elected Official, Department Director or Manager as soon as possible, requesting bereavement leave according to the individual department policy.

Immediate Family is defined for this purpose as: Spouse; Parent; Grandparent; Step Grandparent; Grandchild; Step Grandchild; Child; Sibling or Step Sibling; Son-in-law or Daughter-in-law; Mother-in-law or Father-in-law. (See DEFINITIONS section)