Designation Noticeunder the Family and Medical Leave Act

Leave covered under the Family and Medical Leave Act (FMLA) must be designated-psoffedted and the employer must inform the employee of the amount of leave that will be counted against the employee's FMLA leave entitlement. In order to determine where leave is covered under the FMLA, the employer may request that the leave be supported by a certification. If the certification is incomplete or insufficient, the employer must state in writing what additional information is necessary to make the certification complete and sufficient. For Vermont residents, if there are differences under Vermont Family and Parental Leave (VPFL), they will be noted below.

| To: | | |
|----------------|---|--------------|
| have provided. | We received your most recent information on | and decided: |

- † ThisFMLA leave request is approved. All leave taken for this reason will be designated as FMLA leave.
- † This leave also qualifies for VPFL and will run concurrently with FMLA.
- † Your FMLAelave request is ONTapproved.
- † The FMLA does not apply to your leave requesv. providing the following information about the amount of time that will be counted against your leave entitlement:
 - † Provided there is no change from your anticipated leave schedule, the following number of hours, days, or weeks will be counted against your leave entitlement:
 - † Because the leave you will need will be unscheduled and intermittent, it is not possible to provide the hours, days, or weeks that will be counted against your FMLA entitlement at this time. When you need to take time off due to this leave, you must follower department's leave procedures and notify your supervisort the time you request the leaveer as soon as possible that the time is designated as FMLA. You have the right to request your remaining FMLA leave balance once in a 30day period (if leave as taken in the 30day period).