

HOW TO: Apply for Catastrophic Leave - for Employees

Summary: When you've determined whether you may apply for catastrophic leave, complete the necessary forms, review them with your supervisor, and submit the forms to Human Resources.

What you, the employee, should do

How you should do it

1. Determine if circumstances merit catastrophic leave
 - 1. Review:
 - o Catastrophic Leave Donation Program (CLDP) [Summary](#)
 - o Catastrophic Leave Donation Program [Procedures](#)
 - Supervisor retains authority to approve your initial leave of absence and to grant an extension of leave status, in accordance with applicable policies and guidelines.**
 - You may not be currently receiving or be eligible to receive, disability or workers' compensation benefits.**
 - 1. Complete the following forms:
 - o [Catastrophic Leave Request form \(CLRF\)](#)
 - o [Notice to Health Care Provider](#) and
 - o [Health Care Provider Certification](#)
 - Note:** In lieu of the Catastrophic Health Care Provider Certification, you may provide the Family and Medical Leave (FMLA) Certification.
 - 2. If you are unable to initiate the process due to incapacitation or to make the request, your supervisor or designated department administrator may submit the request and forms on your behalf.
 - 3. In order to qualify for CLDP, the **health care provider must certify that** you the employee, a member of your family, or a member residing in your home, has a serious health condition.
2. Obtain forms and review with Supervisor
 - All information regarding the catastrophic leave process is confidential.**
 - 1. Determine when you will exhaust all of your leave balances, i.e. sick leave, vacation leave, and compensatory time off.
 - 2. Determine your effective date for your university-paid and employee-paid disability plans.
 - Donated time may only be applied to your disability insurance benefit waiting period.**
 - 3. Determine the number of vacation hours needed for the catastrophic leave. Remember that only vacation hours may be used for CLDP.
3. Work with Supervisor/ Timekeeper
 - 1. Send **copies** of the following forms to Human Resources, Attn: Catastrophic Leave Program, 111 Theory, Suite 200, ZotCode 4600 or fax (949) 824-9299:
 - o [Catastrophic Leave Request form](#)
 - o [Catastrophic Leave Donation form](#)
 - o [Health Care Provider Certification](#)
 - 2. Your supervisor should **retain the original forms** in your medical file.
4. Submit completed forms

For more information refer to the [Disability Management Services](#) menu.

Need an expert? For assistance, send an email to wcdm@uci.edu, call (949) 824-9152 or fax (949) 824-9299.

Notice: University policies, procedures and applicable collective bargaining agreements shall supersede information in this document or elsewhere on this site.