Department of Public Works and Engineering

Subject: Funeral Leave	Departmental Policy No. 3-5			
	Effective: Upon Appro	val		
I. Purpose				
To define the Department's policy concerning approval of excused absences in case of the death of an immediate family member.				
II. Scope				
This policy applies to all Department of employees and supersedes any other or directive.	of Public Works and Engi former Departmental po	ineering Ilicy, procedure		
III. Definitions				
Immediate family - father or father-ir brother, spouse, child or stepchild, gra if, in the opinion of the Department Dir to his or her individual relationship and be required.	andparent, grandchild an ector, such employee's i	d other relatives presence, due		
III. Policy				
In accordance with Section 14-171 of the Code of Ordinances and Administrative Procedures 3-11, Section 6.14, an employee may be excused for as many as three (3) paid calendar days in the case of death in the immediate family.				
As an example, an employee who is regularly off on Saturday and Sunday could be excused from work on Friday, Monday and Tuesday if circumstances warrant.				
The approval of three (3) days for funeral leave is not automatic, i.e., a one (1) day or two (2) day leave may be more appropriate, based on the circumstance of the situation. Each request will be evaluated on the employee's relationship with the deceased as well as the location of the funeral.				
The Department reserves the right to request reasonable documented proof of employees' attendance.				
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The employee may not, under any circumstances, be granted more than the three (3) days of paid funeral leave for each instance of a death in the family. Any absences beyond the approved funeral leave must be charged to the appropriate accrued leave balance or taken as unpaid leave.

IV. Procedures

All funeral leave will be requested by employees through KRONOS using the code DFAM – Death in the Family. Additionally, to convey supporting documentation, supervisors will direct employees to complete the Funeral Leave Request Form (Attachment A). This form is to be maintained in the divisional files.

IV. Compliance

Adherence to the above is mandatory. Any employee who violates this policy may be subject to corrective action up to and including indefinite suspension.

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Department of Public Works and Engineering Funeral Leave Request Form

Employee Name		E	Employe	ee Number		
Division/Unit						
Name of Deceased		Relationship				
Funeral Arrangements						
Date of Funeral/Me	emorial	City			State	
Interment Arrangements (if different from funeral)						
Date of Interment/E	Burial	City			State	
Date(s) Leave Requested	Beginning Dat	e			Ending Date	
Comments (Option	al)					

Requested By:	Date

Approved By:	Date	· · · · · · · · · · · · · · · · · · ·

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