

CERTIFICATION FORM FOR BEREAVEMENT LEAVE UNDER MOU, SECTION 16.13

Under **MOU, Section 16.13: Bereavement Leave – Death of a Relative**, a letter stating the name of the deceased person and the Employee's relationship to the deceased person must be submitted with applicable time sheet/leave report. Please circle the appropriate relationship and write the deceased's first and last name.

_____ Death of spouse, child, stepchild, stepparent, parent of Employee or spouse, brother or sister of Employee or spouse, grandparent or grandchild of Employee or spouse, son-in-law, daughter-in-law, parent of a shared child or other relative who is a permanent resident of the household, aunt, uncle, niece or nephew of Employee or spouse.

Name: _____

I hereby affirm and attest that the information I have provided is true and correct. I understand that if I have provided information that is not true, I may be subject to disciplinary action.

Employee Name (Print)

Date

Employee Signature

Date