

# Paid Parental Leave (PPL) Application

## Auburn University/Auburn Montgomery

### Employee Statement

- Name:** \_\_\_\_\_  
**Banner ID:** \_\_\_\_\_ **Phone number:** \_\_\_\_\_  
**Home address:** \_\_\_\_\_
- Which department are you employed with?** \_\_\_\_\_  
**Please provide the name/email/phone for your supervisor or HR Liaison (HRL):**  
\_\_\_\_\_
- Check one:** I plan to use \_\_\_\_\_ Continuous or \_\_\_\_\_ Intermittent Paid Parental Leave during the period beginning \_\_\_\_\_ and ending \_\_\_\_\_. *(PPL is required to be used within six months of the date of birth or adoption and must be used in a minimum of one week, or 40 hour, increments.)*
- Please check what the PPL request is due to:**

Birth of child(ren) Maternity	Yes _____	No _____
Birth of child(ren) Paternity	Yes _____	No _____
Final adoption of child(ren)	Yes _____	No _____
- Date of birth(s) or date of final adoption order:** \_\_\_\_\_
- Actual last date last worked:** \_\_\_\_\_
- Have you received any Family and Medical Leave Act (FMLA) benefits in the last 12 months?**  
Yes \_\_\_\_\_ No \_\_\_\_\_
- I am providing one of these documents:**  
\_\_\_\_\_ **Childbirth** - Hospital birth record or birth certificate that includes the employee's name  
\_\_\_\_\_ **Adoption** - Court approved final adoption order that includes the employee's name.  
\_\_\_\_\_ **Employee's Initials**

I hereby confirm that this information is accurate and correct and subject to verification for up to six weeks of PPL. Please review Page 2 for important information.

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

\*\*\*\*\*

### FOR HR – BENEFITS USE ONLY

**FMLA Approved** \_\_\_\_\_

- Name:** \_\_\_\_\_ **Banner ID:** \_\_\_\_\_
- Division:** \_\_\_\_\_ **Department:** \_\_\_\_\_ **Hire Date:** \_\_\_\_\_
- Employee Class:** \_\_\_\_\_ **Regular pay rate:** \_\_\_\_\_
- PPL begins:** \_\_\_\_\_ **PPL ends:** \_\_\_\_\_ **or Intermittent PPL:** \_\_\_\_\_
- Date employee is notified of decision:** \_\_\_\_\_ **Date department is notified:** \_\_\_\_\_

**Approved** \_\_\_\_\_ **Date** \_\_\_\_\_

Department Representative/Management – Payroll and Benefits

# Paid Parental Leave (PPL) Application Instructions

## Auburn University/Auburn Montgomery

1. ***Please contact Auburn University Human Resources (AUHR) and apply for FMLA prior to delivery or adoption.*** As a reminder, PPL runs concurrently with an eligible employee's available Family and Medical Leave Act (FMLA) benefits
2. Then, to request PPL at birth or adoption, fully complete and sign this form and provide one of the required documents listed on item No. 8 of the form.
3. Once the form and documents are prepared, please submit them AUHR using one of the following options:
  - Deliver or mail to: AUHR - Benefits, 1550 E. Glenn Ave., Auburn, AL 36849
  - Fax to: 334-844-1799, Attention: Benefits
  - Upload the documents at: [auburn.edu/hr/Secure\\_Document\\_Upload/hrpeb.html](http://auburn.edu/hr/Secure_Document_Upload/hrpeb.html)
4. Your PPL leave request will be reviewed. You, your supervisor and/or your Human Resources Liaison (HRL) will be directly notified of the decision by AUHR.
5. For approved PPLs, your supervisor will be provided the correct earning code(s) so the departmental timekeeper can enter and pay eligible PPL, at 100% of your pre-PPL basic salary, for up to six weeks of PPL eligibility. All PPL must be used in one week (40-hour) increments.
6. If applicable, PPL must be exhausted before applying for the Salary Continuation Plan during an eligible delivery event.
7. The employee is responsible to notify AUHR and their supervisor before the end of PPL of either a return to work date, or continuation of other FMLA.
8. ***The employee is responsible for submitting benefit enrollment changes for the new dependent within 45 days of the birth or adoption, and to verify coverage changes are updated.***

Please email [benefit@auburn.edu](mailto:benefit@auburn.edu) if you have additional questions about PPL.