

Your Guide to the Family and Medical Leave Act of 1993 (FMLA)

The Associate Must:

1. Complete the "FMLA Employee Statement" and submit it to Leave Administrator at leaves@mattressfirm.com or fax to (888) 882-5016. This is required at least 30 days in advance of a planned leave such as childbirth or a planned surgery.
2. Inform DM/Supervisor of intended leave via phone or email.
3. Print "Certification of Health Care for Employee's Serious Medical Condition" found in the FMLA Tool Kit.
4. Complete Section I and II; and the Health Care Provider completes Section III.
5. Submit the form to the Leave Administrator by scanning to email at leaves@mattressfirm.com or fax to (888) 882-5016.

****Note**** The Certification of Health Care for Employee's Serious Medical Condition" is due within 15 days of receipt.

The DM/Supervisor Must:

1. Follow up with an email notification to leaves@mattressfirm.com on the *last* day the Associate reports to work to confirm the dates reflected on the leave request.
2. Follow up with an email notification to leaves@mattressfirm.com on the *first day* the Associate reports to work, after the Leave, to confirm they have actually returned.

****Note**** It is the DM/Supervisor's responsibility to immediately notify the Leave of Absence Administrator when an Associate has missed 3 or more calendar days.

The Leave Administrator Must:

1. Place Associate on FMLA leave in Ultipro and if applicable, stop auto-pay and PTO leave accruals.
2. Since the Associate can choose to have his/her available PTO run concurrently with the Leave of Absence, the Administrator will review the available balance and apply PTO until exhausted, or until the Associate returns, whichever occurs first. This will be based on the Associate's request.

****Note**** If the Associate does not indicate whether or not PTO should be applied **or** the Associate takes an unapproved Leave of Absence, PTO will automatically be applied until exhausted or until the Associate returns, whichever occurs first.

Returning From FMLA:

1. The Associate must provide the Certification of Fitness for Duty form, filled out by the Physician, to the Leave of Absence Administrator. The form must be submitted by scanning/email to leaves@mattressfirm.com or faxed to (888) 882-5016, at least two (2) days before returning to work. **The Associate is not eligible to return until documentation is received and processed.**
2. If the Associate is released with restrictions, he/she must complete a Temporary Job Modification Request form and submit to the Leave of Absence Administrator. The Temporary Job Modification form can be found in the FMLA Tool Kit. The Leave of Absence Administrator will contact the DM/Supervisor to determine whether or not they can accommodate the requested job modifications.
3. If the Associate is released without restrictions the DM/Supervisor will place the Associate on the work schedule and notify the Leave Administrator of the Associate's return from leave. **This must be reported on the actual date the Associate returns to work to ensure the Associate is paid properly.**
4. The Leave of Absence Administrator will notify the Associate of the approval/denial of the requested job modifications.

For Additional information regarding FMLA, please refer to the Associate Handbook.