FMLA Event, Eligibility & Entitlement Calculator

Employee’s Name ____________________________ Banner ID ______________________
Date Request Received ____________________ Response Due Date ________________
FMLA Start/End Dates __________ through __________ Consecutive / Intermittent (Circle One)
Prior FMLA Hours Used / Current Hours Requested / Balance after Assessment:

Use this worksheet with your MY Reports/HR Reports to determine FMLA event, eligibility & entitlement. Use a separate worksheet for each Request/Type of FMLA, i.e. consecutive & intermittent

A. Qualifying Event Assessment

Does one of these FMLA events apply: (Also refer to required medical certification to support request/event.)

☐ Birth, Adoption, Foster Care
  Leave request for bonding/placement of a child must be requested within 1 year from date of birth or placement.

☐ For Serious Medical Illness (*Self or immediate family)
  “Immediate family” includes sons, daughters, spouses or domestic partners, parents, grandchildren, siblings. A son or daughter includes a biological, adopted or foster child; a step child; a legal ward; or a child of a person standing in loco parentis.

☐ Military Family Caregiver (Family member of covered service members including covered veterans who are undergoing medical treatment, recuperation, or therapy for a serious illness or injury.)
  Eligible family members include the spouse or domestic partner, parent, children, designated next of kin as defined by Act.

☐ Military FMLA and Military FMLA Qualifying Exigencies:
  ☐ Short Notice Deployment
  ☐ Military Events & Related Activities
  ☐ Military Care & School Activities
  ☐ Financial & Legal Arrangements
  ☐ Counseling
  ☐ Rest/Recovery (15 calendar days max)
  ☐ Post-Deployment Actively
  Additional activities not encompassed in other categories; (but agreed to by supervisor & employee)
  Covers employees with spouses or domestic partners, sons, daughters, or parents on covered active duty, or has been notified of an impending call to active duty status.

___ Y / N ___ If YES, (Qualifying FMLA event) complete Section C
If NO, contact your HR Consultant to discuss other options.

B. Eligibility (Employment & Work Time) Assessment

___ Y / N ___ Has the employee been employed1 for at least a total number of 12 months in the last seven (7) years at UNM? (Departments will use the FMLA start date as a trigger to look back from this date and count the number of months employed at UNM.)

If YES, continue below.
If NO, contact your HR Consultant to discuss other options.

Multiple employee’s current FTE x 2080 and Enter this amount here.

Subtract any hours from paid or unpaid leave for which the employee did not work2 in the past 12 months3

These are the total number of hours worked by the employee in the past 12 months

Are the total number of hours equivalent to 1250 hours or more?

If YES, this employee is eligible for FMLA and complete Section C
If NO, contact your HR Consultant to discuss other options.

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1 Includes all UNM employment such as temporary, on-call, staff, student, faculty, including paid/unpaid leaves
2 Do not include any paid or unpaid leave (i.e., Holidays, Winter Break, Annual/Sick, prior FMLA leave within last 12 months) since they are not considered work hours.
3 Remember to consider all UNM assignments such as temporary, on-call, staff, student, faculty employment in past 12 months.
C. Entitlement (FMLA Hours Available) Assessment

Enter Employee’s Current Appointment Percentage/Full-Time Equivalent (FTE)

__ Y / N __ + ___

Does the employee have an additional assignment. If yes, enter FTE in box.

= ___

This is the employee’s total FTE at UNM

**Calculation For All Events Except Military Caregivers:**

\[ \text{x 480} \]

Multiply total FTE by 480 hours \((i.e. \ 12 \text{ weeks allotted } \times 40 \text{ hours per week} = 480)\)

**OR**

**Calculation For Military Caregivers Only:**

\[ \text{x 1040} \]

Multiply total FTE by 1040 hours \((i.e. \ 26 \text{ weeks allotted } \times 40 \text{ hours per week} = 1040)\)

\[ = ___ \]

This is the subtotal of FMLA hours available

**Subtract** number of FMLA hours previously used from the subtotal.

*Note: Enter* the number of FMLA hours used in the past 12 months (rolling calendar year\(^4\)). Look back to that previous FMLA start to calculate the previous used FMLA hours.

**Example:** *In the past 12 months, Mary Daniels used FMLA. Her schedule is from Monday through Friday, 8-5 pm. Ms. Daniels used FMLA hours beginning on Monday, January 14 and ending Monday, January 21. Based on this example, Ms. Daniels used 6 days or 48 hours (6 days x 8 hours). You would enter the 48 hours above to subtract from the available FMLA balance.*

\[ - ___ \]

\[ = ___ \]

This is the total amount of time available (at time of the request) and hours the employee may use for this FMLA qualifying event. Enter this balance on the FMLA Tracking Log and refer to the rolling calendar year example for continual tracking/updating used/available time recovered from accrual.

**TIPS**

- Refer to **FMLA Quick Reference** for Supervisor & Employee Requests and Responsibility deadlines
- Use the **FMLA Tracking Log** for each separate FMLA event to track FMLA usage/balance
- Refer to **Sick and Annual Leave policies** for approval of paid leave under FMLA.

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\(^4\) Calculation of a rolling calendar year refers to a “rolling” 12 month period measured backward from the date an employee uses any FMLA leave. This method is basically a “look-back” method wherein the employer will look back over the last 12 months from the date of the request, add all FMLA time used during the previous 12 months and subtract that total from the employee’s 12 week allotted leave.