

WILBERFORCE UNIVERSITY  
Wilberforce, Ohio 45384

Funeral Leave Request

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Policy

*Paid Bereavement Leave*

Eligible regular, full-time employees who have completed ninety (90) days of continuous employment will be granted up to three (3) consecutive work days of paid leave in the event of the death of an immediate family member as defined below. The University will grant the employee two (2) additional days of paid bereavement leave when the funeral of an immediate family member is held more than two hundred (200) miles from the University.

For the purposes of bereavement leave only, immediate family member shall include: spouse, child, parent, sibling, parent-in-law, grandparent, grandchild, stepparent, stepchild, step or half-sibling, son or daughter-in-law, legal ward or guardian or individual with whom the employee permanently resides or resided.

The University will grant eligible employees one (1) day of paid bereavement leave in the event of the death of an extended family member. For the purposes of bereavement leave only, extended family member includes: uncle, aunt, nephew, niece, brother-in-law, or sister-in-law.

The University may require proof of such death as a condition of receiving pay for funeral leave.

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Please Print

Employee Name: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_

Number of days requested: \_\_\_\_\_

From: \_\_\_\_\_ Through: \_\_\_\_\_  
MM/DD/YY MM/DD/YY

The Funeral was held in: \_\_\_\_\_ Date: \_\_\_\_\_  
(City & State)

Name of the deceased: \_\_\_\_\_

Relationship: \_\_\_\_\_

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Supervisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Director of Human Resources: \_\_\_\_\_ Date: \_\_\_\_\_

Note: Depending on the circumstances this request may be turned in before or after the funeral leave is taken.