



**PARENTAL BONDING LEAVE APPLICATION – NYU NEW YORK, WASHINGTON, D.C., & CALIFORNIA**

**INSTRUCTIONS**

To request parental bonding leave under the [University’s Parental Bonding Leave Policy](#) (“Policy”), an eligible employee must submit this Application to the applicable HR Officer/Business Partner or Faculty Affairs Officer, as appropriate, at least 30 days in advance of taking such leave, where practicable. Approval of requests for parental bonding leave requires that the employee meet the eligibility requirements under the Policy, and satisfy any other requirements set forth in the Policy and this Application.

Where the employee meets these requirements, the employee may take up to six (6) weeks of paid parental bonding leave in a 12 month period (as that period is defined under the Policy) to bond as a parent with his or her newborn child, newly adopted child, new foster care child, or with a child newly placed in his or her custody (as all such terms are defined under the Policy).

**EMPLOYEE INFORMATION**

Employee Name: \_\_\_\_\_ University ID Number (see back of NYU ID card): \_\_\_\_\_

Department: \_\_\_\_\_ Job Title: \_\_\_\_\_

Date of Hire: \_\_\_\_\_ NYU Phone Number: \_\_\_\_\_

**DATES OF LEAVE REQUESTED\*** From: \_\_\_\_\_ To: \_\_\_\_\_

*\* Note: An eligible employee must take parental bonding leave within 12 months following the birth of his or her newborn child, or within 12 months of when a child is placed in his or her adoptive care, foster care, or legal custody. In the event that an eligible employee has given birth to a newborn child, the six weeks of parental bonding leave will commence no earlier than after the conclusion of any paid sick leave or statutory short-term disability benefit provided to the employee for the employee’s own medical recovery following childbirth.*

**EMPLOYEE’S CHILD INFORMATION\*\***

Name of Child: \_\_\_\_\_ Age of Child: \_\_\_\_\_

Date of Event: Birth: \_\_\_\_\_ Adoption: \_\_\_\_\_ Foster Care/Legal Custody: \_\_\_\_\_

*\*\* Note: An eligible employee may only take one (1) 6-week parental bonding leave in a 12 month period and the employee forfeits any leave not used in that period. In no case will an eligible employee receive more than 6 weeks of parental bonding leave in a 12 month period, regardless of whether more than one birth, adoption or foster care placement occurs within that time frame.*

**EMPLOYEE’S SPOUSE/PARTNER INFORMATION\*\*\***

Is your Spouse/Partner employed by NYU? YES \_\_\_\_\_ NO \_\_\_\_\_

Is your Spouse/Partner also requesting NYU Parental Bonding Leave? YES \_\_\_\_\_ NO \_\_\_\_\_

If the answer is “Yes” to both questions, please provide the following information regarding your Spouse/Partner:

Name: \_\_\_\_\_ School or Unit: \_\_\_\_\_

*\*\*\* Note: Where eligible employees are both parents of the same child, the maximum bonding leave benefit for both parents is a combined six (6) weeks in a 12 month period.*



**REQUIRED DOCUMENTATION**

*The employee must attach documentation to this Application to confirm the basis for parental bonding leave. Such documentation may include, but is not limited to, a child's birth certificate, hospital discharge papers (pending availability of a child's birth certificate), certificate of adoption or foster care placement, order of custody, marriage license or proof of registered domestic partnership, and/or other appropriate documents, as applicable.*

**APPLYING FOR OTHER UNIVERSITY LEAVES**

*An employee taking leave under any other University policy must also follow the procedures set forth in that policy.*

**ADDITIONAL INFORMATION**

*For more information on parental bonding leave, please review the Policy, available [here](#).*

**CERTIFICATION**

**I certify that the above information which I have supplied is true, complete, and correct and that any false or misleading information may result in denial of leave and any further action deemed necessary by the University. I also certify that I have read the University's Parental Bonding Leave Policy and that I understand and agree to its contents.**

Employee Signature \_\_\_\_\_

Date \_\_\_\_\_

**FOR OFFICIAL USE ONLY:**

Approved by: HR Officer/Business Partner or Faculty Affairs Officer (as appropriate)

\_\_\_\_\_

Date \_\_\_\_\_

Approved by: Office of Employee Relations (for eligible Administrators and Staff) or Academic Appointments (for eligible Professional Research Staff and Faculty)

\_\_\_\_\_

Date \_\_\_\_\_