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Petition for Childbirth Accommodation Funding for Childbirth Leave

Women graduate students in good academic standing who hold a Teaching Assistant/Teaching Associate, or Graduate Student Researcher (GSR) position, and who expect to give birth during the academic quarter for which continued funding is sought, will be excused from regular duties for a period of **up to six weeks** immediately surrounding childbirth, without loss of financial support. The period of paid leave will not extend beyond the end date of the student's job. The student's academic unit must submit all information required below to the Graduate Division, electronically thru the Employee Experience Center (EEC), https://uci.service-now.com/eec>General Inquiry>Graduate Student Employment Requests, for the consideration/approval by the Graduate Dean, at least 30 days prior to the beginning of the leave. Please direct questions to Michelle Fielder or Sonia Lepe through email.

STUDENT

Student Name:	
I attest that I expect to give birth on or about following period: From: To:	and I request paid leave for the
Student ID Number:	Employee ID Number:
Signature of student:	Date:
I have an appointment during this time period	od as a:
Teaching Assistant/Teaching Associate	
Graduate Student Researcher	TA and GSR Split Appointment
GRADUATE ADVISOR	
Name of Graduate Advisor:	
$\hfill \square$ I attest that this student is making satisfactory	progress toward the degree, <i>or</i>
I attach a memo describing extraordinary or ex	tenuating circumstances.
Signature of Graduate Advisor:	Date:
GSR APPOINTEES (to be completed by h	iring unit):
Hiring unit:	
Title code:Step: Pa	ay rate: Percent time:
Amount of time to be charged to Childbirth Accomm	modation Fund (weeks):
Estimated Amount to be charged to Childbirth Acco	ommodation Fund:
Name of PI:	
Signature of PI:	Date:
Department Contact Person:	Phone Ext:

Notes:

- 1. If it is necessary to hire a replacement while the GSR is on Childbirth Leave due to project deadlines, the replacement's salary shall be charged to the same hiring unit funding source that was originally paying the salary of the student on Childbirth Leave.
- 2. As the maximum time a GSR may be on paid leave is six weeks, fee/tuition remission for the replacement should not be necessary. Fee/Tuition remission for the student on leave will remain charged to the account/fund that the student was originally paid from before the student went on leave. In no case is fee/tuition remission to be charged to the Childbirth Accommodation Fund.
- 3. If a student appointed as a replacement has an existing GSR appointment which, combined with the replacement appointment, adds up to 25% time for the entire duration of the quarter, the remission will be charged to the salary funding source(s) according to existing campus remission policy.
- 4. It is not allowable for a replacement GSR to work more than 50% time.

TA APPOINTEES (to be completed by hiring unit):

Hiring unit:			
Title code:	Pay rate:	Percent time:	
Amount of time to be charged to	Childbirth Accommoda	tion Fund (weeks):	
Estimated amount to be charged	to Childbirth Accommo	odation Fund:	
Name of Faculty Supervisor:			
Signature of Faculty Supervisor: _		Date:	
Departmental Contact Person: _		Phone Ext:	
Notes:			
•	•	e hired temporarily, the replacement's salary is to being the salary of the student on Childbirth Leave.	e charged to the
student's partial fee remission an 3. If the student appointed as a up to 110 hours or more of assig the remission will be charged to the 4. Partial fee remission for the sfee remission to be charged to the 5. It is not allowable for a repla 6. Only students in salaried ASE	d the remission will be replacement has an e ned workload, the hiring unit's TA remistudent on leave will refer to the childbirth Accommodement TA to work modern to the control of the co	emain charged to the hiring unit's TA remission budg dation Fund.	cement hours adds fee remission and get. In no case is penefit. Students
Date review completed:			
By (staff name):			
Decision: Approve De	ny (<i>state reason</i>)		
Graduate Dean's signature:		Date:	
Account/Fund to charge for Child	birth Accommodation L	_eave:	

Date Department Notified/Contact: