



Human Resources

Borough of Manhattan Community College
The City University of New York
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Date: _____

Distribution

- Original to Personnel Office
- One Copy to President
- One Copy to Appropriate Dean
- One Copy to Chairperson
- One Copy to Staff Member

NON-INSTRUCTIONAL STAFF
APPLICATION FOR CHILD CARE LEAVE OF ABSENCE
(WHITE AND BLUE COLLAR BARGAINING UNIT)

Part A (to be completed by applicant)

Name _____ SS No. _____

Department _____ Title _____

I hereby apply for child care leave from _____ to _____. In accordance with pertinent contractual provision, University, and Civil Service Regulations.

I became a parent on _____ by birth _____ adoption _____.
If by adoption state birth date of child _____.

Signature _____ Date _____

Part B (to be completed by Department Chairperson and the Director of Personnel).

Extension Request: _____

Previous Use of Child care leave: _____ to _____ (_____ yrs.)
_____ to _____ (_____ yrs.)
_____ to _____ (_____ yrs.)

I have noted this request:

Signature _____ Date _____
Department Chairperson

Signature _____ Date _____
Appropriate Dean

Signature _____ Date _____
Director of Personnel

FOR COLLEGE PERSONNEL OFFICE:

Date employee placed on breakage fund to receive heal coverage: _____

PAF Completed: Yes _____ No _____ Date submitted _____