



# NISHNAWBE-ASKI LEGAL SERVICES CORPORATION

## REQUEST FOR BEREAVEMENT LEAVE

Date: \_\_\_\_\_

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

Position: \_\_\_\_\_

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

**Start Time Off**

Date \_\_\_\_\_ Time \_\_\_\_\_

**Return To Work**

Date \_\_\_\_\_ Time \_\_\_\_\_

Number of Days \_\_\_\_\_ Number of Hours \_\_\_\_\_

<b><u>BEREAVEMENT LEAVE:</u></b> (list generated from personnel policy 16) iv, v	
Please checkmark one.	
<b>IMMEDIATE FAMILY (5 DAYS)</b> SPOUSE (MARRIED/COMMON LAW) CHILDREN (FOSTER/WARDS/COMMON LAW) PARENTS /STEP PARENTS (INLAWS) GRANDPARENTS SIBLINGS (INLAWS) BLOOD RELATIVE LIVING WITH EMPLOYEE	<b>EXTENDED FAMILY (3 DAYS)</b> UNCLE AUNT NIECE NEPHEW COUSIN IMMEDIATE FAMILY OF EMPLOYEES SPOUSE

Employee's Signature \_\_\_\_\_

Supervisor's Signature \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

Executive Director Approval (Required for M, B Leave) \_\_\_\_\_ Date: \_\_\_\_\_