

**APPENDIX 10**  
**Maple Heights City Schools**  
**APPLICATION FOR USE OF**  
**PARENTAL LEAVE**

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

I wish to take parental leave pursuant to Section 7.07 of the Agreement. Check one:

1. I wish to participate in the fringe benefits package and to pay the full monthly premium to the Treasurer by the first day of each month
2. I do NOT wish to participate in the fringe benefits package
3. I choose to use my available sick leave up to the contractual limit before commencing unpaid leave.

My anticipated delivery date is: \_\_\_\_\_

Beginning date of leave: \_\_\_\_\_

Approximate ending date of leave: \_\_\_\_\_

I CERTIFY THAT THIS PARENTAL LEAVE IS NOT BEING USED IN VIOLATION OF THE MASTER AGREEMENT, ARTICLE 7.07, PARENTAL LEAVE.

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Superintendent Signature

\_\_\_\_\_  
Date