**WESTERN CAROLINA UNIVERSITY**

**COVID-19 PAID ADMINISTRATIVE LEAVE**

COVID-19 Paid Administrative Leave is available for permanent employees, temp hourly employees, and students if the employee/student is subject to a quarantine order, has been advised to self-quarantine, has had exposure to someone who tested positive for COVID-19 and is awaiting a diagnosis, or experiences a reaction to their COVID-19 vaccination that prevents them from returning to work, either on the day of vaccination or on the following day. **For leave earning employees**, this leave is up to 80 hours (cumulative for these reasons from March 2020 to June 2021) and can be used before an employee uses personal leave. Once this 80 hours is exhausted and the leave employee’s personal leave is exhausted, then up to another 80 hours of paid administrative leave can be provided for these absences. **For temp hourly employees and students**, this leave is up to 160 hours (cumulative for these reasons from March 2020 to June 2021).

Questions may be directed to Trisha Ray at (828)227-2522/ [trisharay@wcu.edu](mailto:trisharay@wcu.edu) or Anne Banks at (828)[227-2794/ ambanks@wcu.edu](mailto:227-2794/%20ambanks@wcu.edu).

**Employee Information:**

Name: WCU I.D. Number:

Classification / Title: Work Phone Number:

Department: Supervisor:

**Reason for Request:**

Employee is subject to a quarantine order or has been advised to self-quarantine by medical provider

Employee has been exposed to someone who tested positive for COVID-19 and is awaiting a diagnosis

Adverse reaction to the COVID-19 vaccine either the day of vaccination or the following day

**Contact information for the governmental entity ordering quarantine OR the health care provider advising self-quarantine:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name of Clinic, Hospital, Telemed Service, or vaccination clinic:** | |  | | | |
| **Name of Provider:** |  | | | | |
| **Begin date for leave:** |  | **End date for leave:** |  | **Total hours Requested:** |  |

**Employee Signature: Date:**