

How Employees Request a Leave of Absence (including FMLA and Military) in Work Force Dimensions

1 Click on one of the dates on the My Schedule file on your homepage to open to your calendar:

My Schedule
5/10 - 5/16

Mon 10	7a-4p • 7:00 AM - 4:00 PM [...] 7:00 AM - 11:00 AM [4.00] ...Spc 11:00 AM - 12:00 PM [1.00] 12:00 PM - 4:00 PM [4.00] ...Spc
Tue 11	7a-4p • 7:00 AM - 4:00 PM [...] 7:00 AM - 11:00 AM [4.00] ...Spc
Wed 12	7a-4p • 7:00 AM - 4:00 PM [...] 7:00 AM - 11:00 AM [4.00] ...Spc
Thu 13	7a-4p • 7:00 AM - 4:00 PM [...] 7:00 AM - 11:00 AM [4.00] ...Spc
Fri 14	7a-4p • 7:00 AM - 4:00 PM [...] 7:00 AM - 11:00 AM [4.00] ...Spc
Sat 15	
Sun 16	

2 From your calendar, click on the new request icon

My Calendar

Tue	Wed	Thu	Fri	Sat
29	30	31	1	2
Vacation-Scheduled (In Pr...) 7:00 am - 4:00 pm	Vacation-Scheduled (In Pr...) 7:00 am - 4:00 pm	7:00 am - 4:00 pm	New Years Day 7:00 am - 4:00 pm	

3 Choose Leave of Absence case from the drop down

My Calendar

Wed	Thu	Fri	Sat
30	31	1	2
Vacation-Scheduled (In Pr...) 7:00 am - 4:00 pm	Vacation-Scheduled (In Pr...) 7:00 am - 4:00 pm	7:00 am - 4:00 pm	New Years Day 7:00 am - 4:00 pm

Time-off
Leave of Absence case

4 That will open a window where you are able to enter your request/information.

Request Leave of Absenc... X

Start Date *
3/30/2021

End Date
3/30/2021 Clear

Category *
Select Category

Reason *
Select Reason

Frequency *
Select Frequency

5 Use the drop down to select your category (for self, family, military,)

Request Leave of Absenc... X

Start Date *
4/12/2021

End Date
4/12/2021 Clear

Category *
Select Category

Family
Self
WC
Military



6 Use the drop down to select your reason (the choices available are tied to the category you selected).

Request Leave of Absenc... X

Start Date *
4/12/2021

End Date
4/12/2021 Clear

Category *
Family

Reason *
Select Reason

7 Use the drop down to select frequency-- continuous leave or intermittent leave.

Request Leave of Absenc... X

Start Date *
4/12/2021

End Date
4/12/2021 Clear

Category *
Family

Reason *
Select Reason

Frequency *
Select Frequency
Continuous
Intermittent

8 Once you have selected your category, reason, and frequency, click continue.

Request Leave of Absenc... X

Start Date *
4/12/2021

End Date
4/12/2021 Clear

Category *
Self

Reason *
My Own Illness - Injury

Frequency *
Intermittent

Cancel Continue

9 Complete each field in the next drop down menus; your request cannot be submitted if any field with an * is left blank.

Request Leave of Absenc... X

Category: Self
Reason: My Own Illness - Injury
Frequency: Intermittent
Start Date: 4/12/2021
End Date: 4/12/2021

What is your Healthcare Provider's Name?
Provider Contact - Fax
Additional Information
Are you a member of the Sick Leave Pool? *
Are you requesting to use your Sick Pool Hours? *
Do you have SJC Short Term Disability

Request Leave of Absenc... X

Are you a member of the Sick Leave Pool? *
No

Are you requesting to use your Sick Pool Hours? *
NA

Do you have SJC Short Term Disability coverage? *
No

Name of Direct Supervisor *
My Boxx

Telephone Number to contact me during leave *
904.209.0635

Department *
0016 | Personnel

Personal Email *
me@noemail.com

Cancel Submit

10 When completed, click submit and the request is sent to the Benefits Team for processing.