SAMPLE NOTICE TO EMPLOYEE OF TRANSITION TO UNPAID FMLA

June 1, 2010

Employee Name Address City, State Zip

Dear Employee Name:

This letter is sent as an update on your current FMLA leave that began May 24, 2010. I wish to inform you that your allowable 12 weeks of FMLA leave will expire on August 15, 2010.

I also wanted to inform you that as of the pay period ending June 4, 2010, you will have exhausted all of your available PTO leave accruals. As a result, you are considered to be on an unpaid FMLA status as of June 5, 2010. Please contact Mohave County Human Resources to make arrangements for the payment of your portion of your group health insurance premiums if you wish to continue these coverages while in an unpaid FMLA leave status. You can contact Mohave County Human Resources at 928-753-0736 extension 4116.

Also, if you anticipate that you will be off work more than 30 days, you may also wish to ask Mohave County Human Resources about applying for benefits under the Mohave County Short-term Disability (STD) Program. I hope this information is helpful. Please don't hesitate to call me at 928-753-0741 extension 4271 if you have any questions or if I can be of any assistance.

Sincerely,

Name, FMLA Coordinator Mohave County Probation

cc: Mohave County Benefit Coordinator Superior Court Human Resources