



**Adjunct Request for Paid Parental Leave
(AB 2393 Paid Parental Leave/50% pay parental leave*)**

Employee Name: _____ Date of Hire: _____

Job Title: _____ Employee K# : _____

Department: _____ Supervisor Name: _____

Eligibility based on employment with Santa Barbara City College for 12 months (12 months need not be consecutive). Employee is eligible to receive 50% pay under AB 2393. 50% pay is calculated based on teaching assignment at the time leave commences.

Total length of leave is 12 workweeks. Employee must exhaust full-paid sick leave to be entitled to 50% pay.

***Leave taken for the birth of a child of the employee or placement of a child with the employee for adoption or foster care.**

Leave begin date: _____ Expected leave end date: _____

Employee Signature

Date

Human Resources Review & Signature

Date

Cc: Payroll