



Massachusetts Bay Transportation Authority

Mitt Romney
Governor

Kerry Healey
Lt. Governor

John Cogliano
Secretary and MBTA Chairman

Daniel A. Grabauskas
General Manager

REQUEST FOR LEAVE UNDER THE SMALL NECESSITIES LEAVE ACT

In accordance with Authority policy, I certify that on _____ I will/did take _____ hours of leave under the Small Necessities Leave Act (SNLA) for the following purpose:

- to participate in school activities directly related to the educational advancement of my son or daughter;
- to accompany my son or daughter to a routine medical or dental appointment such as a check-up or vaccination; or,
- to accompany an elderly relative to a routine medical or dental appointment, or, an appointment for other professional services related to the elder relative's care.

This leave is/was: **foreseen** **unforeseen**

Employee Name: _____

Employee #: _____ Date of Hire: _____

Job Title: _____

Work Location: _____ Area #: _____

Union/Bargaining Unit: _____ Executive

Employee Signature: _____ **Date:** _____



Supervisor Approved _____ *Denied _____

Signature: _____

Department Head Approved _____ *Denied _____

Signature: _____

*If application is denied, the supervisor should state the reasons on the reverse side of this form. The approval/denial process is not final until the department head has signed the application. A copy must then be given to the applicant. Completed applications should be retained in the employee's departmental file.