

# Rockingham County Military Leave Notification Form

The person who is performing the service (or an official representative of the uniformed service) must give advance written or verbal notice to the employer. The notice requirement applies to all categories of training or service. USERRA does not require a reservist or National Guard member to provide a copy of his or her military orders; however, USERRA provides that following periods of military service of 31 days or more, the returning employee must, upon the employer's request, provide documentation that establishes length and character of the service and the timeliness of the application for reemployment.

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Employee Name: \_\_\_\_\_

Employee Dept.: \_\_\_\_\_ Employee Number: \_\_\_\_\_

In accordance with the Rockingham County Military Leave Policy and Federal and State laws, I hereby notify Rockingham County that I will be taking leave for the following:

Reserve or Guard Annual Training                      Written Orders Attached:  Yes  No

Anticipated Leave From: \_\_\_\_/\_\_\_\_/\_\_\_\_      To: \_\_\_\_/\_\_\_\_/\_\_\_\_

During my leave for annual training, please pay me as indicated below:

I will turn over my check from the military in exchange for a County pay check for regular hours due.

Please pay me from my Earned Time/Vacation balance for my period of leave.

Active Military Service                      Written Orders Attached:  Yes  No

Anticipated Leave From: \_\_\_\_/\_\_\_\_/\_\_\_\_      To: \_\_\_\_/\_\_\_\_/\_\_\_\_

Please pay me my entire Earned Time/Vacation balance.

Please pay me \_\_\_\_\_ hours of my accrued Earned Time/Vacation.

Note: Information regarding your options for continuation of benefits will be mailed to you.

**Comments:** \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Employee Signature

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date

\_\_\_\_\_  
Elected Official/Division Director's Signature

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date

\_\_\_\_\_  
Human Resources Signature

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date

Date Received by HR:

Date Sent to Payroll \_\_\_\_/\_\_\_\_/\_\_\_\_