

72 SPECIAL LEAVE

72.1

Special leave is designed to assist an employee facing an immediate or serious need in some aspect of their life beyond the workplace, such as personal matters or unforeseen emergencies that affect the employee or the employee's immediate family including child care, elder care, domestic emergencies, family emergencies, and illness in the immediate family.

72.2

Special Leave for moving, marriage, and divorce on the day of court appearance is provided in accordance with Corporate policy.

72.3

Special Leave requests shall be submitted to the Manager. Such requests are not automatically granted nor unreasonably withheld. In determining whether to grant leave and how much, leaves may include a blend of special leave, time off in lieu, annual leave, and leave without pay. Alternate work arrangements may be considered where appropriate.

72.4

Where an employee requests an extension of such leave, the employee shall discuss the request with their Manager. A serious attempt will be made to accommodate such a request subject to operational requirements. If such a request cannot be met, the Manager and the employee will discuss alternatives.

72.5

When Special Leave is denied, the reason for withholding shall be given to the employee, if requested, in writing. While the Parties encourage local resolutions, any disputes arising from Special Leave requests that cannot be resolved locally, may be dealt with through the agreed upon dispute resolution mechanism (see Article 16.8 – Accelerated Resolution Process).

72.6

The following guidelines apply to personal matters or unforeseen emergencies as defined in 72.1:

- (i) Every case will be unique and determined on its own facts.
- (ii) Special leave requests should be addressed in a manner that reflects fairness and consistency.
- (iii) Employees carry a responsibility to make arrangements to address the specific need to the best of their ability.
- (iv) Employees must fill out and submit the Special Leave Request Form (Appendix M) to their Manager and provide all necessary facts. Proper documentation may be required if requested by the Corporation.
- (v) In emergency situations, the parties understand that the form will be filled out as soon as possible. In such situations, employees are required to notify their Manager, and scheduler if required, of immediate absence. Employees are required to stay in regular and direct contact with the Corporation.
- (vi) Operational needs of the Corporation will be considered when evaluating Special Leave requests.
- (vii) Employees should also consult alternative legislated leaves available under the *Canada Labour Code* that may be applicable to their situation, see Article 71.

See Appendix M for Special Leave Form.

APPENDIX M: SPECIAL LEAVE FORM

CBC/CMG SPECIAL LEAVE REQUEST FORM

(To Be Completed by the Employee)

PART A - GENERAL

Name: _____ Position: _____
 Preferred Contact information: _____ Employee ID: _____
 Department/Program/Unit Name: _____ Manager: _____

- Special Leave is designed to assist an employee facing an immediate or serious need in some aspect of their lives beyond the workplace, such as personal matters or unforeseen emergencies that affect the employee or the employee's immediate family.
- Special Leave requests shall be submitted to the employee's Manager. Such requests are not automatically granted nor unreasonably withheld.
- Proper documentation may be required if requested by the Corporation. Managers will make their determination based on the information provided, and operational requirements.
- In determining whether to grant leave and how much, leaves may include a blend of Special Leave, Time off in Lieu, Annual Leave, and Leave Without Pay. Alternate work arrangements will be considered where appropriate.

For additional information on Special Leave, please reference Article 72 of the CBC-CMG Collective Agreement.

Reasons for Leave (Please select the reason that applies)

- Child Care
 Elder Care
 Domestic Emergency
 Family Emergency
 Illness in the Immediate Family
 Other Please specify: _____

Period of Total Leave Requested: _____

Dates Requested (please specify): _____

Is this the first request associated with this reason for leave? Yes _____ No _____

Do you anticipate a need for a second or subsequent request related to this reason for leave? Yes _____ No _____

Any other leave available? (Annual, Time in Lieu, etc.) _____

What arrangements have been explored in order to address/ mitigate this specific need? (e.g. other support from family / friends, alternative care arrangements)

Additional Information for Consideration:

Where possible and practical, this form must be submitted prior to the requested leave. The completed form must be emailed to your Manager for approval.

For all Special Leave requests complete Part A, for illness in the immediate family also complete part B

CBC/CMG SPECIAL LEAVE REQUEST FORM

PART B - ILLNESS IN THE IMMEDIATE FAMILY

Relationship of ill family member to employee: _____

Location of ill family member: _____

Extent of care or support required from the employee: _____

Does any other family member work for the CBC / Radio-Canada? Yes _____ No _____

If so, name, department & location _____

Employee Signature

Date

Where possible and practical, this form must be submitted prior to the requested leave. The completed form must be emailed to your Manager for approval.

Please attach any supporting documentation.

For Manager's Completion (following discussion with employee)	
_____ Manager Signature	Total Leave Granted _____
	Paid Special Leave _____
	Annual Leave _____
	Time in Lieu _____
	Leave Without Pay _____
	Other (please specify) _____
<i>Please submit a copy of this form to HR_Records@radio-canada.ca</i>	