



Texas Military Department

Emergency Leave Request for Death in State Employee's Family

An employee is entitled to a maximum of **24 hours** emergency leave, with pay for a death in the employee's family. An employee's family is defined as the employee's spouse, as well as the employee's and spouse's parents, children, brothers, sisters, grandparents and grandchildren (including step relatives). The request must be approved by the State Human Resources Director or an State Human Resources Representative. If approved, a copy of the Emergency Leave approval must be attached with the employee's timesheet.

Name of Employee: _____

Directorate/Section: _____

Total Number of Emergency Leave Hours Requested: _____

Date: _____ TO Date: _____

Deceased Relationship to Employee or Spouse:

- | | | |
|--------------------------|------------------------------|-------------------------|
| Spouse | (Step)Parent | (Step)Child(ren) |
| (Step)Brother | (Step)Sister | |
| (Step)Grandparent | (Step)Grandchild(ren) | |

Approval Recommended By:

Supervisor's Printed Name

Supervisor's Signature

Approved Disapproved

State HR Director or State HR Representative Printed Name

State HR Director or State HR Representative Signature

Submit completed form via email to the OSA HR Office at payroll@military.texas.gov If you have any questions please call 512-782-1012.

Privacy Notice: State law requires that you be informed that you are entitled to: (1) request to be informed about the information collected about yourself on this form (with a few exceptions as provided by law); (2) receive and review that information; and (3) have the information corrected at no charge.