



Town of Hubbardston

7 MAIN STREET
HUBBARDSTON, MASSACHUSETTS 01452
(978) 928-1400 FAX (978) 928-3392

MILITARY LEAVE POLICY

I. GENERAL POLICY

Any employee called to active duty in the Armed Forces of the government has rights to military leave of absence under USERRA. Additional Information on USERRA rights can be found online at the Federal Department of Labor. Employees of the Town are entitled to a leave of absence during the time of the employees' compulsory services in the armed forces of the United States, or during compulsory annual tours of duty not exceeding seventeen calendar days as provided in Chapter 33, Section 59 of the Massachusetts General Laws as members of reserve components of the armed forces of the United States. The employee shall receive their ordinary remuneration while on annual tour of duty per Federal fiscal year. Employees shall not lose any seniority or previously accrued vacation leave, sick leave, personal leave, compensation time or earned overtime.

Employees must provide a copy of military orders to the Town Administrator. Employees returning to Town service within ninety (90) days of military discharge shall not lose seniority.

II. MILITARY LEAVE PAY & BENEFITS WHILE ORDERED TO ACTIVE DUTY UNDER TITLE 10 U.S.C.

The Town will not require the employee to use accrued paid time off during a period of service. Employees may use accrued vacation, personal, military or similar leave with pay during the period of service. Employees are not permitted to use accrued sick leave.

An employee is permitted to use accrued vacation, military or personal time for travel to their duty station. In accordance with USERRA, the employee must have enough time after leaving their shift or scheduled work day to travel safely to the uniformed service site. Depending on

the specific circumstances, including the service duration, the amount of notice, and the service location, additional time to rest or to arrange affairs and report may be necessary.

III. PAY & BENEFITS DURING ANNUAL MILITARY TRAINING AND INACTIVE DUTY TRAINING

Employees attending military training are entitled to a maximum of 17 paid military leave days in a calendar year (January 1 – December 31). Payroll Clerks will enter this time into Harpers as Military Training Time. These 17 paid military leave days do not roll-over from one calendar year to another. The town may not require the employee to use any accrued vacation, personal, or similar leave with pay during Annual Military Training and Inactive Duty Training unless they exceed 17 days per year; then the option is to be unpaid or use accruals. Benefits will continue uninterrupted if the employee is otherwise eligible.

IV. PAY & BENEFITS FOR ADDITIONAL TRAINING ACTIVITIES

If an employee is ordered to active duty for training for a period greater than 30 days, the town may request a letter from the employee's Commander before granting compensation and benefits described under Military Leave Pay and Benefits while ordered to Active Duty Title 10.

V. PAYROLL POLICIES

Compensation Increases

If an employee is entitled to a step increase, COLA, or contractual increase while on unpaid leave they will receive this additional compensation effective the date they return.

Accruals

Upon return from active duty military leave, an employee will receive a prorated number of PTO days for the remainder of the calendar year, consistent with USERRA, unless they had already earned PTO annual accruals in January of that same calendar year. Employees will not receive retroactive accruals.

If an employee is service on annual training orders or inactive duty training orders, they will continue to accrue benefits if they are otherwise eligible.

VI. REEMPLOYMENT POLICIES

An employee who has been honorably discharged or released from active duty will be reemployed in the position the employee would have held if continuously employed. If the employee's period of military service was more than 90 days, the employee will be reemployed in a position of like seniority, status and pay. He or she must be deemed qualified to perform the duties of that position. The town will make reasonable efforts to help the employee become qualified to perform the duties of the position.

Reemployment Timetable

To be eligible for protection under USERRA, the service member must report back to work or apply for reemployment within the following guidelines:

- 1-30 days of service Report next scheduled work day *
- 31-180 days of service Apply within 14 days following completion of service.
- 181+ days of service Apply within 90 days following completion of service.

* After 8 hours rest plus normal travel time from military training site to place of civilian employment.

VII. LINKS

TRICARE: www.tricare.mil

USERRA Code of Regulations: www.dol.gov/vets/regs/fedreg/final/2005023961.htm

U.S. Department of Labor: www.dol.gov/vets/programs/userra/index.htm

Employer Support of Guard & Reserves (ESGR): www.esgr.mil

Massachusetts Department of Veteran Services: <https://www.mass.gov/orgs/massachusetts-department-of-veterans-services>

Hubbardston Veteran Services: <https://www.hubbardstonma.us/veterans-agent>

TOWN OF HUBBARDSTON
Request for a Leave of Absence

Directions for applying for a leave: <ul style="list-style-type: none"> Complete this form and return it to the designated person in your Department Health Care Provider completes: Certification of Health Care Provider (return to Human Resources Dept.) 		
Employee's Name:	Complete Home Address:	
Department & Position held:	Day phone #:	Employee #:
REASONS FOR LEAVE (CHECK ONE):		
Family and Medical Leave (FMLA) <ul style="list-style-type: none"> <input type="radio"/> Birth of child Due Date: _____ (Requires Certificate of Health Care Provider Form) <input type="radio"/> Placement for Adoption/Foster Care (Requires placement documentation) <input type="radio"/> Serious Health Condition of Employee (Requires Certification of Health Care Provider Form) <input type="radio"/> Care for seriously ill family member (Requires Certification of Health Care Provider Form) <p style="margin-left: 20px;">(If checked, provide name of seriously ill family member and relationship)</p> <p>Name: _____ Relationship: _____</p>		
Leave of Absence <ul style="list-style-type: none"> <input type="radio"/> Medical (employees not eligible for FMLA) <input type="radio"/> Military <input type="radio"/> Maternity (employees not eligible for FMLA) <input type="radio"/> Personal <input type="radio"/> Small Necessities Leave: I certify that I will take _____ hours for: <input type="radio"/> Medical reason for _____ child/ _____ elderly relative Education reason for _____ 		
Provide a brief statement on the reason for the leave requested:		
Start Date: _____ End Date: _____		
Are you requesting intermittent leave? YES NO (circle one) Please explain:		
Are you requesting a reduced work schedule? YES NO (circle one) If so, please explain:		
I understand that if I fail to return to work as of the expiration date of my leave of absence, without an authorized extension from Human Resources, it will be understood that I have resigned employment from the Town of Hubbardston (subject to ADA regulations). I also acknowledge that I have received a notice regarding Family Medical Leave (FMLA) if applicable.		
Employee Signature:	Date:	
Department Head Signature:	___ approved ___ denied Date:	
Town Administrator:	___ approved ___ denied Date:	

Please note this request is subject to the final Human Resources approval.