

Bereavement Leave**4.2.5****PURPOSE**

To establish the policy and procedure for the use of bereavement leave.

AUTHORITY

California Government Code Section 12945.7, applicable Memorandum of Agreement (MOA) or Benefit and Compensation Summary for Management/Professional Employees (Compensation Summary). Information contained in the current MOA or Compensation Summary supercedes information contained herein to the contrary.

SCOPE

This policy and procedure applies to all eligible employees.

POLICY

When an eligible employee of the City finds it necessary to be absent from work due to the death of a relative that is listed in this section, the employee shall be entitled to use bereavement leave for up to five (5) days. The days of bereavement leave need not be consecutive.

As soon as the need for a bereavement leave is known, the employee, or someone on their behalf, must notify the employee's immediate supervisor.

The employee is responsible for certifying as to their need for the use of a bereavement leave on the Request for Bereavement Leave Form.

BEREAVEMENT LEAVE BENEFITS

A. For eligible employees represented by the following employee units:

- Association of Engineers and Architects (AEA)
- Association of Legal Professionals (ALP)
- Association of Management Supervisory Personnel (AMSP)
- Association of Building, Mechanical and Electrical Inspectors (ABMEI)
- City Association of Management Personnel (CAMP)
- International Brotherhood of Electrical Workers, Local 332 (IBEW)
- Municipal Employees' Federation, AFSCME Local 101 (MEF)
- International Association of Operating Engineers, Local 3 (OE#3)
- Peace Officer Park Ranger Association (POPRA)
- Unclassified non-management employees in Unit 82
- Executive Management (Unit 99)

Each full-time or benefited part-time employee shall be granted bereavement leave with full pay for up to forty (40) hours to attend to the customary obligations arising from the death of any of the following relatives of the employee or employee's spouse or employee's domestic partner as listed below. Due to the employee's regular work schedule, if the five (5) day entitlement exceeds forty hours, employees may supplement the remaining time off using their accrued leave balances, including sick leave and compensatory time off.

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Each unbenefited part-time employee shall be granted unpaid bereavement leave for five (5) days and may use their accrued leave balances, including sick leave and compensatory time off.

All leave must be used within three (3) months following the death of an eligible person (please consult the applicable Memoranda of Understanding or Benefit and Compensation Summary). Under extreme circumstances, the 3-month requirement may be waived by the Director of Employee Relations. The decision of the Director of Employee Relations shall be final, with no process for further appeal.

- Parents/Step-parents
- Spouse
- Child/Step-child
- Brother/Sister; Step-brother/sister; Half-brother/sister
- Grandparents/Step-grandparents
- Great grandparents/Step-great grandparents
- Grandchild
- Brother/Sister-in law/Son/Daughter-in-law
- Domestic Partner

A domestic partner must be the domestic partner registered with the Human Resources Department.

No eligible employee shall be entitled to compensation for bereavement leave in the event of the death of any of the above relatives if such employee is not scheduled to work when such bereavement leave is required.

For information regarding leave following reproductive loss, please refer to the City's [Reproductive Loss Leave Policy](#).

B. For employees represented by the San José Police Officers' Association (POA):

Each employee shall be entitled to use bereavement leave for up to five (5) days in the event of the death of any of the following relatives of such employee or employee's spouse:

- Parent/Step-Parent
- Child/Step-Child
- Spouse
- Brother/Sister/Step-Brother/Step-Sister/Half-Brother/Half-Sister
- Grandparent/Step-Grandparent
- Great Grandparent/ Step- Great Grandparent
- Grandchild
- Domestic Partner
- Brother/Sister-in law/Son/Daughter-in-law

Each full-time employee shall be granted bereavement leave with full pay for a period up to forty (40) hours. Due to the employee's regular work schedule, if the five (5) day entitlement

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exceeds forty hours, employees may supplement the remaining time off using their accrued leave balances, including sick leave and compensatory time off.

Each employee who experiences the death of a significant other with whom they are cohabitating in lieu of a spouse is entitled to the same bereavement leave as outlined above for the death of that significant other.

Notwithstanding the foregoing, no such employee shall be entitled to compensation for bereavement leave in the event of the death of any of the above relatives, if such employee is not scheduled to work when such bereavement leave is required.

For information regarding leave following reproductive loss, please refer to the City's [Reproductive Loss Leave Policy](#).

C. For employees represented by the International Association of Fire Fighters, Local 230 (IAFF):

Each employee shall be entitled to use bereavement leave for up to five (5) days in the event of the death of any of the following relatives of such employee or employee's spouse:

- Parents
- Step-parents
- Spouse
- Child/step-child
- Brother/step-brother/half-brother
- Sister/step-sister/half-sister
- Grandparent/step-grandparent
- Great-grandparent/step-great-grandparent
- Grandchild

Each full-time employee shall be granted bereavement leave with full pay for a period of four (4) days in the case of employees on other than twenty-four (24) hour shifts or two (2) work shifts, for personnel assigned to work twenty-four (24) hour shifts. Due to the employee's regular work schedule, if the five (5) day entitlement exceeds the compensation above, employees may supplement the remaining time off using their accrued leave balances, including sick leave and compensatory time off.

Each employee who experiences the death of a significant other with whom they are cohabitating in lieu of a spouse is entitled to the same bereavement leave as outlined above for the death of that significant other only.

Anything hereinabove to the contrary notwithstanding, no such employee shall be entitled to compensation for bereavement leave in the event of the death of any of the above relatives, if such employee is not scheduled to work when such bereavement leave is required.

Employees are eligible for bereavement leave, as described above, even though the funeral of the designated relative does not occur on the employee's regularly scheduled workday; however, the employee is not eligible for compensation for bereavement leave on days when the employee is not scheduled to work or at any time more than three (3) months after the death of the designated relative except under special circumstances (e.g., delayed funeral).

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For information regarding leave following reproductive loss, please refer to the City’s [Reproductive Loss Leave Policy](#).

PROCEDURE

The City employee shall adhere to the following established procedure for reporting and verifying bereavement leave usage to the best extent possible.

<u>RESPONSIBILITY</u>	<u>ACTION</u>
Employee or someone on their behalf	<p>Notify immediate supervisor of need for bereavement leave, relationship of deceased to employee, and dates of leave.</p> <p>Prepare <i>Request for Bereavement Leave Form</i> and forward to the immediate supervisor of the employee requiring bereavement leave.</p>
Immediate Supervisor	<p>Verify that bereavement leave usage is in accordance with the benefits listed in the Bereavement Leave Benefits section and the applicable MOA.</p> <p>Complete supervisor’s portion of the <i>Request for Bereavement Leave Form</i> and forward to the Department Timekeeper.</p>
Departmental Timekeeper	<p>Verify bereavement leave usage in accordance with the Bereavement Leave Benefits section and the applicable MOA.</p> <p>Ensure that timesheet reflects Bereavement Leave or applicable leave balances.</p>

Approved:

 /s/ Jennifer Schembri
 Director of Employee Relations
 Director of Human Resources

 2/5/24
 Date

Approved for Posting:

 /s/ Jennifer A. Maguire
 City Manager

 2/5/24
 Date

City of San José
Request for Bereavement Leave

EMPLOYEE INSTRUCTIONS

1. Please sign and return this form to your Immediate Supervisor no later than the first working day following your return from bereavement leave. **Note** that the department may require additional verification for use of Bereavement Leave. Such verification must be submitted within 10 working days of the request.
2. Please refer to the MOA for your bargaining unit or the applicable benefit summary for additional information regarding eligible relatives and the maximum length of Bereavement Leave.

Name of Employee		Classification	Department
Phone Number	Employee ID No.	Days Taken	Hours Taken

EMPLOYEE CERTIFICATION

I _____ declare that it was necessary for me to take Bereavement Leave
 Print Name

on/from _____ to _____ due to the death of my

_____ on _____
 Relationship Name of Deceased Date

 Employee Signature Date

SUPERVISOR CERTIFICATION

I _____ have reviewed the employee's request to use Bereavement
 Print Name
 Leave and confirm that the employee is eligible for such leave.

 Supervisor's Signature Date