



**City of Albany**  
Human Resources Policy  
Policy #: HR-BC-02-004  
Title: Bereavement Leave

**Benefits &  
Compensation**

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**Purpose** The City of Albany provides bereavement leave to grant paid time off to employees for absences related to the death of immediate family members.

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**Policy** **Eligible Employees:**

All regular Non-bargaining and Executive employees are eligible for bereavement leave under this policy. Provisions of collective bargaining agreements prevail for bargaining unit employees.

City temporary employees are not entitled to receive bereavement leave under City policy; but may be entitled to bereavement leave under the Oregon Family Medical Leave Act (OFLA) if eligibility requirements are met.

**Paid Time Granted:**

Bereavement leave is granted according to the following schedule:

- 1) In the event a regular employee suffers from a death in her/his immediate family, s/he shall be granted five (5) days leave with pay per occurrence to grieve the death and for making arrangements or attending the funeral, which shall not be deducted from her/his accrued leave banks.
- 2) This leave will run concurrently with the Oregon Family Medical Leave Act (OFLA) Bereavement Leave provision when applicable. See HR-BC-08-004 for additional information.
- 3) Bereavement leave under City policy and OFLA must be used within sixty (60) days of the death. However, where the employee has informed the City of the death at the time of the event, that the need for bereavement leave will be delayed, the employee has up to twelve (12) months from the date of the death to use bereavement leave under this Policy.
- 4) Additional time may be supplemented by use of other accrued leave when approved by the employee's supervisor.
- 5) The City reserves the right to request documentation confirming the need for bereavement leave at its discretion.

**Procedure:**

- An employee who wishes to take time off due to the death of an immediate family member should notify his or her supervisor immediately.



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- Employees requesting bereavement leave are required to complete the City’s Employee Leave Request form prior to taking leave, if possible, or, otherwise, immediately upon return.
  - Information provided on the Leave Request form should indicate the decedent’s relationship to the employee and the date of death.
  - Acceptable proof of need for bereavement leave includes, but is not limited to, a death certificate, memorial program, or obituary column.
- Bereavement leave granted shall be noted on the employee’s timesheet.

**Definitions**

**Immediate family-** shall be defined as: spouse; domestic partner, parent or stepparent; parent-in-law or stepparent in-law; brother, brother-in-law, or stepbrother; sister, sister-in-law, or stepsister; child (including step-, foster, or adopted child of employee or spouse); child's spouse; grandparent (including step-grandparent); grandchild; uncle; aunt; nephew; niece; first cousin; legal guardian parent; legal guardian child; equivalent relatives of an employee with a domestic partner, or any person in the employee's household.

**References**

Refer to specific Collective Bargaining Agreements and Family Medical Leave Policy (OFLA Bereavement Leave).

**Review and Authorization**

Supersedes: HR-BC-02-003 01/01/2014	Created/Amended by/date: DS; 06/08/2016	Effective Date: 06/10/2016
HR Director:		City Manager:

1. Form or worksheet revision related to this document? No  Yes

If yes, attach a copy of the revised form or worksheet.

2. Training required? No  Yes