

This job aid explains how an employee going on **FMLA** or **Delaware Paid Family Leave** creates and manages one of these leaves. NOTE: There is no mobile version for Leave Management.

Note: Throughout the leave process you will receive email notifications updating you about its status and other information.

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Creating a Case

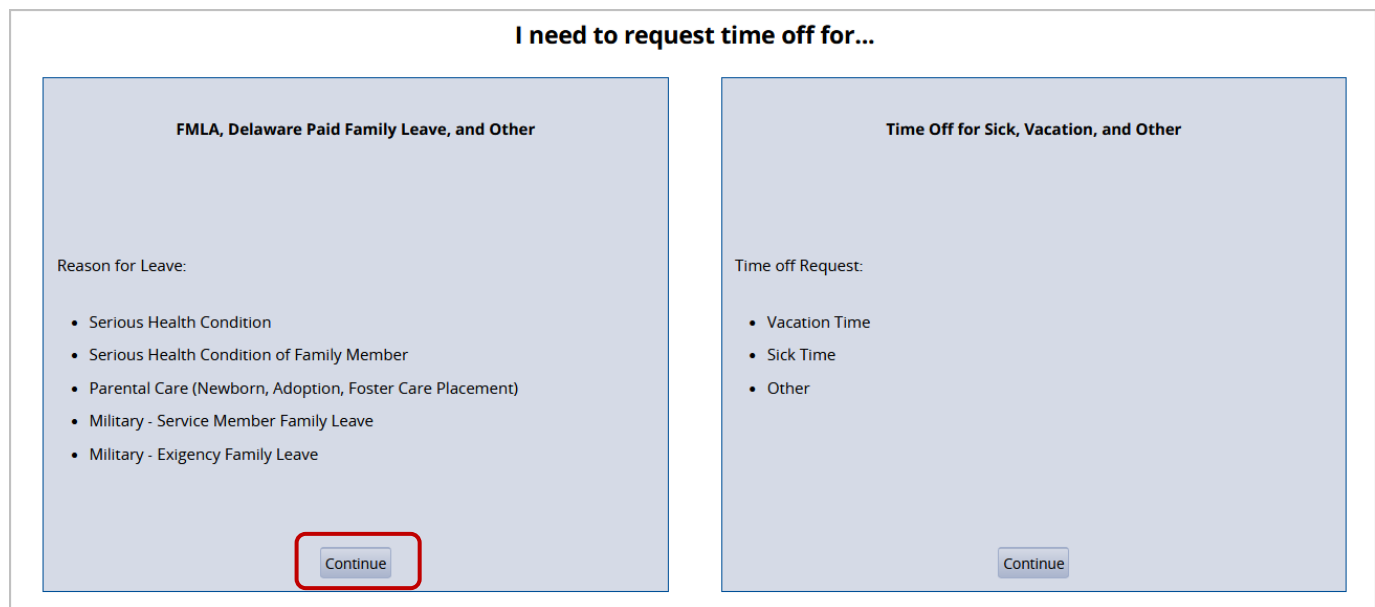
1. From the **Home Screen**, select **My Time Off**. The **Request List** window appears.
2. Click **Create New Request**.



3.

Type	Start Date	End Date	Amount Requested	Status	Case ID
Leave - Other Person Health Condition	01/01/2026	01/30/2026	n/a	Pending	263

4. A screen appears with two grey boxes. Click the **Continue** button on the left box.



I need to request time off for...

FMLA, Delaware Paid Family Leave, and Other

Reason for Leave:

- Serious Health Condition
- Serious Health Condition of Family Member
- Parental Care (Newborn, Adoption, Foster Care Placement)
- Military - Service Member Family Leave
- Military - Exigency Family Leave

Continue

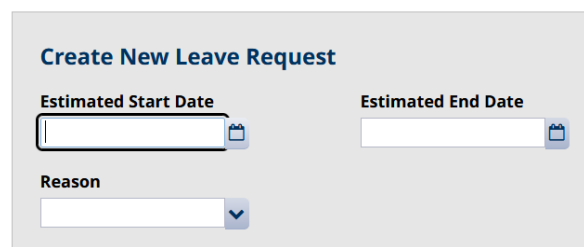
Time Off for Sick, Vacation, and Other

Time off Request:

- Vacation Time
- Sick Time
- Other

Continue

5. Enter the **Estimated Start Date** and **Estimated End Date** of the leave



Create New Leave Request

Estimated Start Date

Estimated End Date

Reason

6. Select the leave type in the **Reason** list

Reason*

- Pregnancy and Childbirth
- ~~Donation~~
- Self Health Condition
- Child Bonding
- Child Placement
- Other Person Health Condition
- Military Deployment
- Military Exigency
- ~~Crime Victim~~
- ~~Declared Emergency~~
- ~~Disaster Response~~
- Other

NOTE: Some of the reasons do not apply under the Delaware law. **These are the only ones available to use at UD:**

- Pregnancy and Childbirth
- Self Health Condition
- Child Bonding
- Child Placement
- Other Person Health Condition
- Military Deployment
- Military Exigency
- Other

7. Many of the **Reasons** have explanations; hover over them to view. Below are some examples:

Self Health Condition
Use this reason when you need time off because of your own health condition that is not covered by one of the previous reasons and is not related to pregnancy.

Child Bonding
Use this reason when you need time to bond with and care for your newborn, newly adopted or newly placed foster child.

Military Deployment
Use this reason when you are being activated by the Armed Forces of the United States, National Guard, Commissioned Corps of the Public Health Service, National Disaster Medical System, FEMA or some other agency.

Other
Use this reason when no other selection applies.

8. After selecting the **Reason**, click **Continue to additional questions** (at the bottom left of the screen).

[Continue to additional questions](#)

[Discard Request](#)

9. The questions will vary depending on the **Reason** you chose.

- Click **Continue** until you've answered all the questions.
- For Continuous Leave skip to Step 9.

Specific Instructions if the leave will be taken on an intermittent basis:

STEP 1 - Leave Management:

- When answering the questions, choose **Intermittently, as needed**

During this leave, I expect to be away from work

Intermittently, as need ▼

All day, every day

Intermittently, as needed

- Explain how you intend to use the leave intermittently

How often do you anticipate being away from work?

Weekly treatments for 2-3 hours

STEP 2 - Time Off Request (TOR): You must also submit a **TOR** when the leave is taken intermittently.

- Click **Create New Request** button. When this pop-up message appears, choose the first option.

I need to request time off for...

I need time off related to an existing leave request

Request ID: 246 01/05/2026 - 01/30/2026 Self Health Condition Employee ➡

I need time off for something else ➡

- Time Off Type** - select **Intermittent Leave of Absence**
- Then complete the TOR as usual with **Dates**, click **Next**, etc.

Create Time Off Request

Time Off Type* Intermittent Leave of Absence ▼ ➡

Case ID 246

Case Dates: 01/05/2026 To 01/30/2026

Reason: Self Health Condition

Person Affected: Employee


Dates* 01/05/2026 To 01/05/2026


Comments

Next

10. At the end of the question, use dropdown to choose **Email** for how you receive paperwork. Click **Continue**.
11. Enter your email address and click **Continue**.


How would you prefer to receive paperwork (forms, letters, etc) related to this leave?

Email 

 **Continue**

Enter the email address we should use.


xxxxx@udel.edu

 **Continue**

12. Finally, one or two questions require your consent.
 - Click the checkbox to certify your answers are “true based on my knowledge and belief.” Click **Continue**.

I certify that the answers to the questions above are true based on my knowledge and belief.

☒


 **Continue**


- Click 2nd checkbox to acknowledge you have read and understand the appropriate leave policy. (Note: The wording of the acknowledgement may be different, depending on the leave type.)

I acknowledge that I have read and understand the Leave Policies available to me on the UD website. I understand that I must provide accurate and complete information and any such further documentation HR Benefits may request within the requested time frame.

☒

13. After completing the questions, click **Submit Request** at the bottom left.

 **Submit Request**

 **Change responses to preliminary questions**

NOTE: your answers to the leave questions can **ONLY** be modified while the case is in **Pending** status.

- Click on the leave case you want to modify

[+ Create New Request](#)

Current **Past**

Type	Start Date	End Date	Amount Requested	Status	Case ID
Leave - Military Exigency	07/01/2025	07/31/2025	n/a	Pending	48
Leave - Self Health Condition	12/16/2025	12/19/2025	n/a	Pending	244
Leave - Military Deployment	01/22/2026	02/06/2026	n/a	Pending	245

- This opens the case in the “manage” mode. The left side of the screen looks like below.
- Click the **Edit** button to modify your answers.

Case 48

Case Date Range: Jul 1, 2025 - Jul 31, 2025

Status: **PENDING**

Reason: Military Exigency

Use paid time: Employee-Elected

Case Type: Continuous

Person Affected: Partner/Spouse

Contact: xyyang@udel.edu

Case Managers:

Projected Usage

[View Usage Summary...](#)

Leave Type	Start Balance	Allowed Period	End Balance
Pending HR review			

Documents

[Upload New File...](#)

Description	Status
There are no documents to display.	

Questions

[Edit Answers...](#)

What is your relationship to the service member?

My Spouse

Managing Your Leave Case(s)

Reminder: Throughout the leave process you will receive email notifications updating you about its status and other information.

After creating a case, it must be managed and monitored.

1. From the **Home Screen**, select **My Time Off**. The **Request List** window appears. Select the case you want to manage. We'll look at Case #263.

Current		Past				
Type	Start Date	End Date	Amount Requested	Status	Case ID	
Leave - Military Exigency	07/01/2025	07/31/2025	n/a	Pending	48	
Leave - Other Person Health Condition	12/16/2025	12/19/2025	n/a	Pending	263	
Leave - Military Deployment	01/22/2026	02/06/2026	n/a	Pending	245	

2. This screen appears. The **LEFT side** is where you (employee) manage the case. The **RIGHT side** shows the leave's workflow tasks.

Case 263

Case Date Range: Jan 1, 2026 - Jan 30, 2026

Reason: Other Person Health Condition

Case Type: Continuous

Contact: xxxxxx@udel.edu

Case Managers:

Status: **OPEN**

Use paid time: Employee-Elected

Person Affected: Partner/Spouse

Projected Usage

View Usage Summary...

Leave Type	Start Balance	Allowed Period	End Balance
FMLA	12.00 weeks		7.80 weeks
Delaware Paid Family Leave (Combined Leave)	12.00 weeks		7.80 weeks
Delaware Paid Family Leave (Family and Medical Leave)	6.00 weeks		1.80 weeks

Documents

Upload New File...

Description	Status
Leave Eligibility Letter	Document sent and archived
US DOL Medical Certification for Family Member's Serious Health Condition (WH-380-F)	Document sent and archived
US Dept of Labor FMLA Rights and Responsibility Notice (form WH-381)	Document sent and archived

Questions

For whom do you need to provide care?

Spouse

What is the name of the person for whom you will be providing care?

Luke Combs

Will the health condition require staying one or more nights in a hospital or other treatment facility?

Case Manager Tasks

Acknowledged by Employee

Completed Today

Eligibility Reviewed

Completed Today

Leave Eligibility Letter

Completed Today

US DOL Medical Certification for Family Member's Serious Health Condition (WH-380-F)

Completed Today

US Dept of Labor FMLA Rights and Responsibility Notice (form WH-381)

Completed Today

Receive Medical Certification(s)

Expected Completion Dec 31, 2025

Submit JED

Expected Completion Jan 1, 2026

Waiting for event Review Certification Form(s) and Determine Final Eligibility to be completed

Review Certification Form(s) and Determine Final Eligibility

Expected Completion Jan 5, 2026

Waiting for event Receive Medical Certification(s) to be completed

Notify Manager of Leave Status

Expected Completion Jan 6, 2026

Waiting for event Review Certification Form(s) and Determine Final Eligibility to be completed

3. More details about the employee's **Case** (left) side:

Case 263

Case Date Range: Jan 1, 2026 - Jan 30, 2026

Status: **OPEN**

Reason: Other Person Health Condition

Use paid time: Employee-Elected

Case Type: Continuous

Person Affected: Partner/Spouse

Contact: xxxxxx@udel.edu

Case Managers:

Projected Usage

View Usage Summary...

Leave Type	Start Balance	Allowed Period	End Balance
FMLA	12.00 weeks		7.80 weeks
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Documents

Upload New File...

Description	Status
Leave Eligibility Letter	Document sent and archived
US DOL Medical Certification for Family Member's Serious Health Condition (WH-380-F)	Document sent and archived
US Dept of Labor FMLA Rights and Responsibility Notice (form WH-381)	Document sent and archived

Questions

For whom do you need to provide care?

Spouse

What is the name of the person for whom you will be providing care?

Luke Combs

Will the health condition require staying one or more nights in a hospital or other treatment facility?

Yes

Case ###: shows the Case number and general details

Status changes as the case progresses

- **Pending** means the case has been submitted but not yet approved. You can modify to your answers in this status.
- **Open** means the case has been approved by the Leave Management Team
- **Closed** means the case has been completed

Projected Usage: displays your balances for the leave period(s)

- Use the **View Usage Summary** button to see a high-level view of the balances.


Documents: displays any documents already uploaded.

- Use the **Upload New File** button to attach requested documents for the case
- Requested documents will be highlighted in red if they have not yet been sent or received.

Questions: displays your answers to the Leave Questions.

- Use the **Edit Answers** button to change your answers if needed. (This button is only available when the **Status** is **Pending**.)
- To edit an answer, hover over the answer and you will see a **pencil icon**. Click the icon and edit the answer.

What is the name of the health care provider treating you during the pregnancy?

 Dr Dolittle

4. More details about the **Case Manager Tasks** (right) side:

This section displays the various tasks that you (employee) or Leave Management Team will be handling for the case.

- Completed tasks display with green check marks and the associated date.



- The tasks in white are the next scheduled tasks in the process.

Case Manager Tasks	
Acknowledged by Employee	Completed Today
Eligibility Reviewed	Completed Today
Leave Eligibility Letter	Completed Today
US DOL Medical Certification for Family Member's Serious Health Condition (WH-380-F)	Completed Today
US Dept of Labor FMLA Rights and Responsibility Notice (form WH-381)	Completed Today
Receive Medical Certification(s) Expected Completion Dec 31, 2025	
Submit JED	 Expected Completion Jan 1, 2026 Waiting for event Review Certification Form(s) and Determine Final Eligibility to be completed
Review Certification Form(s) and Determine Final Eligibility	 Expected Completion Jan 5, 2026 Waiting for event Receive Medical Certification(s) to be completed
Notify Manager of Leave Status	 Expected Completion Jan 6, 2026 Waiting for event Review Certification Form(s) and Determine Final Eligibility to be completed
Submit JED	 Expected Completion Jan 30, 2026 Waiting for event Review Certification Form(s) and Determine Final Eligibility to be completed

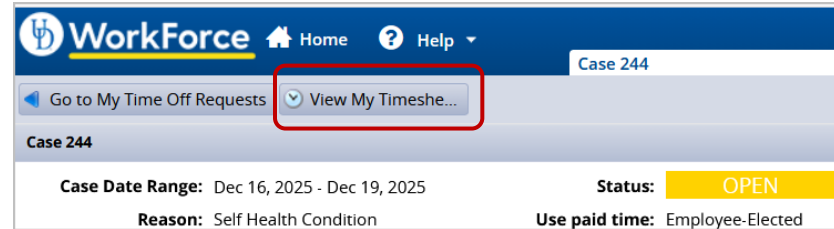
5. More details about the **History** (lower right) side:

This section displays the history of the case and who/what accomplished the task.

- **System** indicates a document which was system-generated based on the Leave Type being managed.
- **Specific names** listed indicate the member of the Leave Management Team who handled the designated document

History		
Dec 16, 2025	 Document Required Employer to Employee Notice (rev-2019-01).pdf Sent Automatically  Document sent	Wilson, Lainey
Dec 16, 2025	 Document auto-fill FMLA Eligibility Letter - Standard or Military.docx Sent Automatically  Document sent	Wilson, Lainey
Dec 16, 2025	 Document Certification of a Serious Health Condition Form (rev-2020-01).pdf Sent Automatically  Document sent	Wilson, Lainey
Dec 16, 2025	 Document Required Employer to Employee Notice (rev-2019-01).pdf is Attached	System
Dec 16, 2025	 Document Certification of a Serious Health Condition Form (rev-2020-01).pdf is Attached	System
Dec 16, 2025	 Document auto-fill WH-381 (rev-2020-09).docx is Attached	System
Dec 16, 2025	 Document auto-fill FMLA Eligibility Letter - Standard or Military.docx is Attached	System
Dec 16, 2025	Workflow event 'Send Medical Certification Form(s)' triggered	Wilson, Lainey

6. You can view the leave's impact on your pay on your Timesheet.
7. From Case screen, click **View My Timesheet** (at the top)



8. Click the **Results** tab at the bottom of the Timesheet

Exceptions ? Schedule Time Off Results ACT Balances									
Day ▲	Work Date	Assignment Description	Pay Code	Case ID	Paid Ho...	Unpaid ...	Es	Gross P...	Rate
Tue	12/16/2025	Learning & Development Consult-Employe...	Protected L...	244	0.00	7.50		0.00	0.00
Wed	12/17/2025	Learning & Development Consult-Employe...	Protected L...	244	0.00	7.50		0.00	0.00
Thu	12/18/2025	Learning & Development Consult-Employe...	Protected L...	244	0.00	7.50		0.00	0.00
Fri	12/19/2025	Learning & Development Consult-Employe...	Protected L...	244	0.00	7.50		0.00	0.00
Mon	12/22/2025	Learning & Development Consult-Employe...	Regular Time		7.50	0.00		0.00	0.00
Tue	12/23/2025	Learning & Development Consult-Employe...	Regular Time		7.50	0.00		0.00	0.00
Wed	12/24/2025	Learning & Development Consult-Employe...	Holiday		7.50	0.00		0.00	0.00
Thu	12/25/2025	Learning & Development Consult-Employe...	Holiday		7.50	0.00		0.00	0.00
Fri	12/26/2025	Learning & Development Consult-Employe...	Regular Time		7.50	0.00		0.00	0.00
Mon	12/29/2025	Learning & Development Consult-Employe...	Regular Time		7.50	0.00		0.00	0.00