

BMO Financial Group - U.S. Request for Parental Leave of Absence Form

Section 1: Employee information (completed by the applicant)

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|------------------------------|---|--------------------|--|----------------------|---------------------------|-------------------|
| Employee Name (Please Print) | | Employee ID Number | | Last 4 digits of SSN | | |
| Home Street Address | | Home City | | Home State | Home Zip Code | Home Phone Number |
| Date of Hire | Status (circle one) Full-time or Part-time ____ hours/week | Supervisor's Name | | | Supervisor's Phone Number | |

Section 2: Employee anticipated leave details (completed by the applicant)

Anticipated Birth/Placement Date _____

Anticipated Leave Start Date _____ Anticipated Return to Work Date _____

Note: The first 16 weeks of your leave will be paid under the Parental Leave Benefit. You may choose to take up to an additional 8 weeks of unpaid bonding leave. If you intend to use any available Sick and/or Vacation hours to provide salary continuation during the unpaid portion of your leave, you will need to enter your Sick and Vacation hours into the Absence application of Workday. You may also ask your manager to input this information into Workday on your behalf. Payroll will not process any Sick or Vacation hours until they have been entered into Workday. After your Sick and Vacation time has been applied, the remaining portion of your leave will be unpaid.

Important note to employees eligible for Family and Medical Leave: If you are eligible, this form will also serve as your application for the Family and Medical Leave Act (FMLA) related to the care of a child after birth or adoption (therefore you will not need to apply separately for FMLA). If your Parental Leave of Absence is approved, it will usually run concurrent with your Family and Medical Leave time-frame. To be eligible for a Family and Medical Leave, you must be a permanent employee of BMO for at least 12 months and have worked at least 1,250 hours during the 12 months preceding your leave start date.

If you have already exhausted your 12 weeks of the Family and Medical Leave Act time prior to birth/placement of your child or you are not eligible for FMLA, you are still eligible for the full 16 weeks of paid Parental Leave.

Section 3: Attestation & Signature (completed by the applicant)

I attest that the information provided in this form is accurate and complete. I understand that I will need to contact Matrix Absence Management at 1-888-295-7862 as soon as possible following delivery/placement to initiate my Leave of Absence. Failure to promptly notify Matrix of delivery/placement may result in a delay of my Parental Leave Benefit pay. If my Leave of Absence plans change, I must notify Matrix immediately to update my leave information.

I understand that failure to return to work at the end of my approved leave period will be considered a voluntary resignation, effective on the date I was scheduled to return to work, unless an extension has been approved.

| | |
|-----------|------|
| Signature | Date |
|-----------|------|

Please send the completed Request for Parental Leave of Absence form to Matrix Absence Management within 15 days of the date that you notify Matrix of your request for parental leave.

Matrix Absence Management, Inc.
Claim Office
Return this form to: 2421 W Peoria Ave Ste 200
Phoenix, AZ 85029
FAX: 1-866-683-9548

Employees can access claims status and claims detail through www.MatrixAbsence.com or via the Matrix App.