



Request for Paid Parental Leave

Please send completed forms (or copy and paste to an email) to CODEmployeePaidLeave@dallas.gov. If the child is already born or placed please also include documentation proving the birth or adoption.

Please note you must be approved for FMLA to qualify for Paid Parental Leave.

Employee ID: _____

Your name (First then Last): _____

Department: _____

Supervisor (First then Last): _____

Is this a birth, adoption, or foster child? _____
If the baby is already born please use actual birth date instead of projected date.

When is the expected due date or adoption date? _____

Have you already applied for FMLA? Yes _____ No _____

Have you been approved for FMLA? Yes _____ No _____

How many hours do you work in a 6-week period (an 40 hour week is 240 hours)? _____

First day of paid parental leave: _____ *

Last day of paid parental leave: _____ *

**Please note your Paid Parental Leave dates must be within your approved FMLA dates. If your FMLA dates do not include your requested Paid Parental Leave dates please contact FMLASource to update your FMLA approval dates. To contact FMLASource call 1-833-515-0767.*

Information about Paid Parental Leave can be found here: [City of Dallas Approved Employee Leaves](#)

Information about FMLA can be found here: [City of Dallas FMLA](#)