

## MILITARY LEAVE OF ABSENCE REQUEST (EXCEEDS 30 DAYS)



230.35(3)(a)-(b), Wis. Stats.

**Instructions:** This form must be completed by all state employees, except limited term employees, for extended military service that exceeds 30 days. Official military orders and a recent Leave Earnings Statement (LES) should accompany this form as soon as available. All documents should be submitted 30 days in advance of the first day of leave, when possible. If orders/recent LES documents are not received prior to first day of leave, the timesheet(s) will default to Leave without Pay or Military Unpaid Leave depending on work status. In addition, LES copies should be provided throughout the deployment by the employee or designee. Submit all documents to [DMAPayroll@widma.gov](mailto:DMAPayroll@widma.gov). Employees must also communicate their Military Leave of Absence to their supervisor.

**State Military Leave Questions:** Email [DMAPayroll@widma.gov](mailto:DMAPayroll@widma.gov)

**Payroll and Benefits Online System:** PeopleSoft ([ess.wi.gov](http://ess.wi.gov))

**Authority and Cross Reference:** [Wis. Stats. Chapter 230.35](#), [WI Human Resources Handbook Chapter 720](#)

SECTION 1 Employee Information		
EMPLOYEE NAME ( <i>First, Middle Initial, Last</i> )	PERSONAL PHONE NUMBER	
PERSONAL EMAIL	AGENCY NAME Wisconsin Department of Military Affairs	
WORK UNIT ( <i>Base, Division, Directorate</i> )	LOCATION	
JOB CLASSIFICATION	EMPLOYEE STATUS <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	WORK STATUS <input type="checkbox"/> Without Permanent Status <input type="checkbox"/> Permanent Status
DAILY STATE RATE (HOURLY RATE OF PAY * 8, REGARDLESS OF HOURS SCHEDULED TO WORK)		

SECTION 2 Point of Contact (POC) Information if Unavailable During Military Leave	
POC NAME ( <i>First and Last</i> )	RELATIONSHIP
ADDRESS	PHONE NUMBER
EMAIL ADDRESS	

### SECTION 3 Leave and Benefit Options

#### Paid and Unpaid Leave

Below are the Paid and Unpaid leave options based on the length of deployment and status of state employment. The actual eligibility for each type of leave will be determined based on orders, classification, permanent status, and any other applicable eligibility factors.

All Military paid leave is calculated between the difference of state daily pay and military daily pay. If state daily pay is higher than military daily pay, a Military Pay Refund (MPR) deduction will be made from each state paycheck. If military daily pay is greater than state daily pay, unpaid leave will be applied. If changes to either state daily pay or military daily pay occur while on orders or deployment, a change may be required to the type of leave. Employees may choose to use their own accrued leave (except sick leave) in lieu of leave without pay

(LWOP), Military Paid Leave, and/or Military Unpaid Leave for all situations below, when such leave is available

A final reconciliation of pay, benefit deductions, and leave balances will be completed upon return.

**Employees without permanent status: (select one below):**

- ☐ Leave Without Pay/Not Eligible for Military Leave (Inactive duty, active-duty training, or guard/reserves enlistment)
- ☐ Military Paid Leave + 30 Days (Deployed Armed Forces, National Guard with Federal Orders, or State Active Duty if daily state pay is greater than daily military pay)
- ☐ Leave Without Pay (Enlistment in Armed Forces that does not include National Guard/Reserves)

**Employees with permanent status: (select one below):**

*Permanent employees receive 30 days/240 hours of paid military leave per calendar year. After the first 30 days have been used, Basic Allowance for Housing (BAH) will be included in the military daily pay calculation to determine pay differential eligibility.*

- ☐ Military Unpaid Leave (active-duty or guard/reserves enlistment where 30 days/240 hours of annual military leave has already been used or daily military pay is greater than daily state pay)
- ☐ Military Paid Leave first 30 days/240 hours
- ☐ Military Paid Leave + 30 Days (Deployed/Active Duty Armed or Federal National Guard or Guard/Reserves Enlistment, Active-Duty Training greater than 3 days, or State Active Duty)
- ☐ Leave Without Pay (Enlistment in Armed Forces that does not include National Guard/Reserves)

**Wisconsin Retirement System (WRS)**

Employees who use Leave Without Pay/Not Eligible for Military Leave and/or Military Unpaid Leave may be eligible to make up some, all, or none of their missed Wisconsin Retirement System (WRS) contributions through USERRA.

**Employee Benefits – All Insurance Benefits**

Employees may elect to continue current benefit deductions if sufficient state daily pay is received while on orders or deployment. Otherwise, employees may prepay their benefit deductions by personal check or money order to Department of Military Affairs Payroll to keep their benefits active. Employees have the option to lapse insurance benefits and re-enroll within 30 days upon their return to work. Employees must use the boxes below to indicate their benefit continuation during their leave of absence.

Benefit	Currently Enrolled	Continuation While on Leave	Employee's Monthly Cost	Pay Distribution	Comments, Notes, etc.
State Group Health Insurance	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$		Excludes injury or illness resulting from war or act of war. Please complete the Health Insurance Election for Military Service Personnel form ET-2350.
Delta Dental Select / Select Plus	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$		Excludes injury or illness caused by any type of military action, friendly or hostile.

Delta Vision	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$		No military exclusions
State Group Life	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$		Life benefit is payable for loss resulting from an act of war.
Income Continuation Insurance	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$		Benefit NOT payable if disability is due to war or act of war.
Pre-Tax Savings Account	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$		No deductions with unpaid leave.
WRS Contributions	<input type="checkbox"/> All <input type="checkbox"/> Some <input type="checkbox"/> None	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$		Employees may make up all, some or none of the employee-required WRS contributions upon return to work.

SECTION 4 Acknowledgements		
EMPLOYEE SIGNATURE		DATE
PAYROLL & BENEFITS SPECIALIST	PAYROLL & BENEFITS SPECIALIST SIGNATURE	DATE