Temporary Voluntary Unpaid Furlough Request Form



Request date:

GVSU staff have the opportunity to volunteer for a temporary unpaid furlough as part of the University's response to the COVID-19 pandemic. This opportunity is available to regular full-time and part-time staff and is completely voluntary. Approved volunteers for the temporary unpaid furlough opportunity will be completely relieved of work duties for up to the entire available period from June 21 to August 20, 2020. The University expects that volunteers will apply to receive unemployment benefits, including enhanced benefits through July 31.

Requests are due June 12th by noon to your Appointing Officer after which they will assess its staffing needs and notify those volunteers whose requests are granted or denied. Because of the current circumstances, the University makes no assurance that requests to participate in either opportunity will be granted or that any individual furlough will continue for the entire approved furlough period.

Name:	Phone:	Email:
Supervisor name:	Department:	
Job Title:		G#:
Hourly Staff: What furlough dates are you requ	esting? Farliest start date is 6/21/	2020. Latest end date is 8/20/2020.
, ,	End Date requested	
Salaried Staff:		
What furlough dates are you requ	esting? (must choose only one date	e from each list)
Requested Furlogh Start Date	Requested Furlogh End Date	
□ 6/21/20	□ 7/5/20	
□ 7/6/20	□ 7/20/20	
□ <i>7/</i> 21/20	□ 8/5/20	
□ 8/6/20	□ 8/20/20	

By signing below, I attest to the following:

- I elect to participate in the GVSU Staff voluntary furlough program and acknowledge that it is unpaid.
- I understand that my participation in the program is completely voluntary and that I am not required to participate, and I have not been subjected to any influence or pressure to do so.
- I agree to participate with the understanding that the university will continue its contributions to my health, dental, base life and disability benefits.
- I understand that vacation time will not accrue during my furlough, and I will not be paid for holidays if they fall within my furlough period.
- I understand that while my medical and dental employee contribution will be waived during the period of my furlough, I am responsible for paying for all voluntary benefit elections when I return to work from payroll deductions and I authorize that they be deducted from my pay.

- I have the right to opt out of planned voluntary furlough days by giving written notice to my supervisor and Human Resources no fewer than 2 work weeks before the start of my furlough. I agree that I can be recalled from the furlough before it anticipated end date with three days' notice. I understand that no bumping rights apply to my return from voluntary furlough, if applicable.
- I understand that I am not allowed to perform any work during a furlough day. I am not to check GVSU email, make or take calls on GVSU business, or otherwise engage in work for the GVSU during my furlough period.

Employee Acknowledgment		
Employee Signature	Date	
Administrative Approval		
AO Signature	 Date	

Once signed by Appointing Officer please submit forms to hrintern@gvsu.edu