

### REQUEST FOR FAMILY OR MEDICAL LEAVE

#### Employee Notification

Request for Family or Medical Leave must be made in writing, if practical, at least 30 days prior to the date the requested leave is to begin.

Name Angela Baldwin Date 9/04/2015  
 School Bryant Position 4th Grade Teacher

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I request a family or medical leave for one or more of the following reasons. I understand that a physician's certification and all required information must be submitted before this request is processed.

\_\_\_\_\_ Because of the birth of my child, or because of the placement of a child with me for adoption or foster care.

\_\_\_\_\_ In order to care for my spouse/child/parent who has a serious health condition.

X For a serious health condition that makes me unable to perform my job. THIS CONDITION IS X IS NOT WORK RELATED.

\_\_\_\_\_ Requested intermittent or reduced leave scheduled \_\_\_\_\_

Leave to start 9 11 2015 Expected return date 6 10 2016

- X I would like to use my sick/personal days
- \_\_\_\_\_ I would not like to use my sick/personal days
- \_\_\_\_\_ Original request for leave
- \_\_\_\_\_ Request for extended leave

Employee Signature Angela Baldwin Date 9/04/2015

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#### LEAVE APPROVAL

Principal/Designee Signature Jacquanai Gipson Date 9-11-15

Superintendent Signature [Signature] Date 9/11/15

Board Secretary Signature \_\_\_\_\_ Date \_\_\_\_\_

Board President Signature \_\_\_\_\_ Date \_\_\_\_\_

Sick Days - 176  
 09-04-15P02:36 RCVD



# ANXIETY & STRESS CENTER, P.C.

*Specialized care for people & relationships*



August 17, 2015

Re: Angela Baldwin

To Whom It May Concern,

This letter is to provide recommendations for Angela Baldwin. Angela Baldwin has been attending weekly psychotherapy sessions at Anxiety & Stress Center since March 2015. She has been diagnosed with General Anxiety Disorder and Major Depressive Disorder.

These diagnoses do have the potential to impact Ms. Baldwin's ability to work. She has frequent episodes of anxiety which include feelings of panic, increased heart rate, feelings of being overwhelmed, and inability to focus on her current environment. In addition, she also experiences feelings of depression which impact her ability to plan, poor motivation, and episodes of sadness.

At this time, Ms. Baldwin would like to take an extended leave of absence. It is recommended that should Ms. Baldwin continue to work, she should be provided with additional supports, including an in classroom aide to assist her with her students should she become overwhelmed and unable to perform, as well as additional classroom supports, including additional prep time, curriculum resources, and staff support.

If you have any questions, please contact me at 708-349-5433 ext 5, or you may also contact me via e-mail at [krosian@anxiety-stresscenter.com](mailto:krosian@anxiety-stresscenter.com).

Thank You,

A handwritten signature in black ink that reads "Karen Rosian Psy.D." in a cursive script.

Karen Rosian, Psy.D.  
Licensed Clinical Psychologist  
Anxiety & Stress Center

08-20-15P01:08 RCVD

[www.Anxiety-StressCenter.com](http://www.Anxiety-StressCenter.com)

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