

**Manitoba Association of Crown Attorneys (MACA)
RETURN SERVICE AGREEMENT FOR
EMPLOYEES ON PARENTAL and/or ADOPTIVE LEAVE**



Employee Name: _____ Number: _____ Dept: _____

*** Please Note: You can apply for Parental/Adoptive Leave Plan “A” or “B” but not both**

PARENTAL or ADOPTIVE LEAVE PLAN “A” (No Supplement to EI): Applicable Not Applicable (Maximum 63 weeks following commencement date)

Date Leave Commences: _____ Date Leave Expires: _____

An employee who has been granted parental or adoptive leave shall be permitted to apply up to a maximum of ten (10) days of their accumulated sick leave against the Employment Insurance (EI) waiting period. Please indicate your choice: I accept I decline

I, _____, for and in consideration of qualifying for Parental Leave Plan “A” do hereby agree that:

- (a) I will return to work with the Government of Manitoba on the day that my leave expires, unless that date is modified by the employing authority; and
- (b) Should I not return to work following my leave for a period of employment sufficient to allow for re-accumulation of the number of sick days granted, I will be indebted to the Government of Manitoba for, and agree to compensate the Government of Manitoba, for the balance of the outstanding days at the time of termination.
- (c) Approved sick leave with pay granted during the period of return shall be counted as days worked.

PARENTAL or ADOPTIVE LEAVE PLAN “B” (Supplement to EI): Applicable Not Applicable (maximum 37 weeks following commencement date)

Date Leave Commences: _____ Date Leave Expires: _____

*** Please Note: Plan “B” only applies to employees applying for 37 week of EI parental leave benefits. Plan “B” does not apply to term employees or employees who normally are subject to seasonal lay-off.**

I, _____, for and in consideration of receiving a Supplement to Employment Insurance (EI) for Parental Leave do hereby agree that:

- a Plan B only applies to employees applying for 37 weeks of EI parental leave benefits. I confirm that I am only applying for 37 weeks of EI parental leave benefits.
- b I will return to work with the Government of Manitoba on the day that my Parental Leave expires, unless that date is modified by the employing authority; and
- c If I am a full-time employee, I will remain in the employ of the Government of Manitoba on a full-time basis for at least the six (6) months (*in addition to my return of service commitment for maternity leave, if applicable*), immediately following my return to work; or
- d If I am a part-time employee, I will remain in the employ of the Government of Manitoba on a part-time basis for at least the six (6) months (*in addition to a return of service commitment for maternity leave, if applicable*) immediately following my return to work; or
- e If I am a full-time employee and if I so request and the employing authority authorizes me to return as a part-time employee; I will remain in the employ of the Government of Manitoba on a part-time basis for at least the twelve (12) months (*in addition to my return of service commitment for maternity leave, if applicable*) immediately following my return to work; and
- f If I fail to return to work as stipulated in (a), I will be indebted to the Government of Manitoba for, and agree to repay the Government of Manitoba, through payroll deduction and/or another method of payment satisfactory to the employing authority, the full amount of pay received by me from the Government of Manitoba as a supplement to EI during my entire period of leave; or

Signature of Applicant

Date

Employing Authority Approval:

(Please print name)

Signature

Date

*** PLEASE RETURN COMPLETED FORM TO YOUR PAY & BENEFITS OFFICE ***