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**A Few Helpful Acronyms**

Taking a Leave of Absence is important and we want to help you understand your rights and responsibilities, as well as the many acronyms that apply. Here’s a preview for easy reference:

- **LOA** – Leave of Absence
- **FMLA** - Family Medical and Leave Act
- **PDL** - Pregnancy Disability Leave
- **CTO** - CHOICE Time Off
- **LTD** - Long Term Disability
- **STD** - Short Term Disability
- **SDI** - State Disability Insurance
- **COBRA** - Consolidated Omnibus Budget Reconciliation Act (health benefits)
- **USERRA** - Uniformed Services Employment and Reemployment Rights Act
INTRODUCTION

Robert Half has a variety of Leave of Absence policies addressing employees’ needs and these policies are provided in adherence with applicable federal and state laws, including the Family and Medical Leave Act (FMLA). Robert Half’s policies also provide certain benefits in addition to what is required by law. Organized in two sections, this manual is intended to give you an overview of the company’s Leave of Absence policies, eligibility criteria, applicable benefits and the application procedures for each type of leave.

- **Part I** discusses in general terms each Leave of Absence offered and addresses details common to each type of leave such as the maximum length of leave, eligibility and whether the leave is paid or unpaid.
- **Part II** outlines specific details regarding each type of leave offered by Robert Half, as well as information on applicable state regulations regarding leaves.
- At the end of the document, you’ll find an Appendix summarizing your rights and responsibilities under FMLA.

I. GENERAL DESCRIPTIONS

Situations covered by Robert Half’s Leave of Absence (LOA) policies:

A Leave of Absence is defined under Robert Half’s policy as an absence from work requiring the employee to be away from work for more than five consecutive business days (seven calendar days) due to the following reasons:

A. The employee’s own serious illness, injury or disability due to pregnancy or childbirth;
B. The serious illness or injury of the employee’s spouse, child, stepchild, parent, stepparent, or other covered family member (see Appendix);
C. To care for or bond with a newborn child, or a child newly placed through adoption or foster care;
D. The employee’s work related injury;
E. The employee’s obligation for military service;
F. To care for or spend time with a family member who is in active military service;
G. A personal leave.

The above list covers most of the circumstances that an employee of Robert Half might need to take a Leave of Absence. Some of the reasons for a leave will be covered by more than one Leave of Absence policy. For example, depending on eligibility, an employee’s own illness or other leave may be covered by FMLA, state leave laws and by Workers’ Comp. However, the time available for the leave will run concurrently, and will not be extended if there is coverage under more than one policy unless otherwise required by law.
Family Members

An employee's spouse, child(ren) and parents are immediate family members.

The term “spouse” is husband or wife and includes same sex or opposite sex spouse whose marriage (or common law marriage) is legally recognized. Where the term “spouse” is used, the term “domestic partner” is included. This applies to all Robert Half leaves of absence. Robert Half recognizes domestic partners as same-sex and opposite-sex couples who have entered into a legally recognized civil union or who have registered with any state or local government domestic partnership registry. In the absence of a legally recognized civil union or registration with a state or local government domestic partnership registry, for Robert Half benefit purposes, a domestic partner is an adult person of the same or opposite sex with whom you are in a committed and mutually exclusive relationship and with whom you are jointly responsible for each other’s welfare and financial obligations. You reside together in the same principal residence and intend to do so indefinitely. You are both over the age of 18, not married to someone else and are not blood relatives.

Child refers to biological, adopted, or foster child, stepchild, legal ward or a child of a person standing in “in loco parentis” (in place of a parent or parents authority). The term stepchild also includes a child of the same-sex spouse.

The term stepparent also includes the employee’s stepparent who is the parent’s same-sex spouse (or common law spouse).

Eligibility

Eligibility for a Leave of Absence varies. Some leaves are available from the first day of employment and others require the employee to work a minimum period of time before coverage applies. Specific eligibility requirements are discussed in Part II of this document.
Application for Leave of Absence

Employees should request a leave of absence 30 days (or as otherwise required) in advance if the leave is foreseeable such as a scheduled surgery or childbirth. If the leave is unforeseeable, employees should report a leave as soon as possible. You must notify your manager as soon as possible that you would like to request a leave of absence.

To initiate a request for a Leave of Absence, Robert Half employees should contact ADP Leave Administration and Salaried Professional Services employees should contact the Robert Half Benefits Department as noted below:

<table>
<thead>
<tr>
<th>Leave of Absence Contact</th>
<th>Robert Half Employees</th>
<th>Salaried Professional Services Employees</th>
</tr>
</thead>
<tbody>
<tr>
<td>Call ADP</td>
<td>1.855.744.6947 or 1.855.RHI.MYHR</td>
<td>Call or email Benefits Dept. 888.677.6613 <a href="mailto:benefits@roberthalf.com">benefits@roberthalf.com</a></td>
</tr>
<tr>
<td>Have Handy</td>
<td>Be prepared to provide your name, employee ID, phone number, home address, business and personal email address, birth date, and work schedule, as well as reason for leave, first date you will be absent and your anticipated return date.</td>
<td></td>
</tr>
<tr>
<td>Next Steps</td>
<td>Leave administrator will walk you through the next steps and you will need to complete/return important documents. Please take careful notes and keep copies on file for future reference.</td>
<td></td>
</tr>
</tbody>
</table>

**Note:** Access to company systems and email will be suspended for the duration of the Leave of Absence (i.e., VPN, email, electronic devices such as laptops, smartphones, tablets, intranet, etc.—Employee’s Cell Phone will be accessible).

**Medical Certification**

If the leave is for your illness, injury or disability, you are required to submit a completed medical certification from a health care provider or doctor. The certification is also required to make a determination for a Short Term Disability claim. The certification should certify that:

- You are disabled and unable to work due to an illness, injury or other serious health condition;
- The start date and anticipated end date of the period of disability.

For a leave to care for your family member with a serious health condition, you are required to submit a Leave of Absence application form and a medical certification form from the family member’s health care provider or doctor to certify that you are required to be away from work to care for the family member. The note should also provide the start and anticipated end date for the period of the family member’s disability or serious health condition.

For a bonding leave, in addition to submitting a Leave of Absence application form, you are required to submit a hospital birth record or a birth certificate of your newborn. For an adoption, you may submit documentation concerning the placement of a child by adoption or through foster care.
Failure to provide sufficient documentation in a timely manner to support your Leave of Absence may result in a delay or denial of the leave request. If an employee fails to return to work after the Leave of Absence request has been denied, the employee may be terminated for job abandonment.

**Maximum Length of Leave of Absence**

A Leave of Absence for an employee’s own illness, injury or disability will extend for the period of time the employee is unable to work due to the serious health condition, as certified by a health care provider or the maximum leave time allowed under the Robert Half policy which ever period is shorter.

For a leave to care for a family member, newborn or newly adopted or foster child (FMLA), the length of the Leave of Absence for eligible employees will be governed by the time allotted under the statutes which provide for this type of leave and may also depend, in some circumstances, on the total time an employee has been away from work on a Leave of Absence during the rolling 12 month period. The rolling 12 month period is measured backward from the date an employee’s FMLA or applicable state leave begins. Each time an employee begins FMLA leave, the length of leave available is any balance of the 12 workweeks that has not been used during the preceding 12 months.

**First Seven Calendar Days of Leave – Use CHOICE Time Off or Sick Time**

The first seven calendar days of a Leave of Absence will generally be paid using CHOICE Time Off (CTO) or accrued Sick Time - up to 40 hours of CTO or Sick Time in accordance with the law. If no CTO or Sick Time is available, the first seven days will be unpaid. Short Term Disability benefits, if eligible, will be payable after seven calendar days of disability.

**Short Term Disability (STD) and Long Term Disability (LTD) Benefits**

Robert Half provides company-paid STD and LTD insurance benefits for you. You may also purchase additional LTD coverage. Liberty Mutual is the STD and LTD carrier. STD benefits may be payable after seven calendar days of disability due to non-work related illness, injury, or pregnancy. The amount of the STD payment is 70% of your regular base salary up to 90 days and then 60% of base pay from day 91 to day 180. STD benefits will be offset by other disability payments such as state disability insurance.

Robert Half also provides company-paid basic LTD insurance benefits to you. Basic LTD insurance provides a benefit that is equal to 60% of your benefits eligible earnings, generally your base pay plus the 12 month average of your bonuses and commissions, up to $15,000 per month. Employees have an option to purchase additional LTD coverage.

After you exhaust STD, if you are still disabled, Liberty Mutual will work with you to transition your benefit to LTD. Liberty Mutual will mail you a STD - LTD transition letter.
How Benefits and Coverages Work While on Leave

Employees on an approved Leave of Absence continue group health insurance coverage up to FMLA exhaustion or up to 12 weeks for other leave or as otherwise required by law. Employees are responsible for their portion of any premiums during a leave. Robert Half has partnered with Discovery Benefits for the direct bill process. You will be sent communications regarding how to make your payment directly from Discovery Benefits. You can reach Discovery Benefits at 1.877.248.0510 with any questions regarding the direct bill process.

- If you active coverage under medical, dental and vision plans is terminated for other than non-payment of premiums, you will be eligible for COBRA coverage through Discover Benefits.
- Basic company-paid and supplemental Life and Accidental Death and Dismemberment (AD&D) insurance will continue for employees on an approved LOA up to 12 months, providing that premium have been paid on a timely basis.
- Employees on a Workers’ Compensation or Military Leave will continue to be covered under the provisions of all employer provided life insurance and employee-paid life insurance (providing premiums have been paid on a timely basis) for 12 months.
- CTO, Sick Time and Floating Holidays do not accrue while on LOA. Employees on LOA will not be paid for the company’s scheduled holidays unless receiving base pay from the company.
- A Leave of Absence does not constitute a break in service.

Special Note: Employees on Active Duty Military Leave are subject to different rules regarding benefits and should consult the specific requirements set forth in the Military Leave policy.

Communication with Office

If able, an employee on a leave may be asked to respond to work related questions for which the employee has unique knowledge from the employee’s supervisor that may arise during a leave. During any type of Leave of Absence an employee is responsible for providing Robert Half Leave Administration or his or her supervisor with periodic updates regarding the expected length of the leave and anticipated return date. If a leave must be extended, the employee is responsible for providing the documentation supporting an extended leave to Robert Half Leave Administration. Leave extensions are at the discretion of Robert Half and subject to the maximum leave time available to an employee under the applicable leave policy.

Failure to provide needed documentation to Robert Half for an extension to a Leave of Absence may result in denial of the request to extend a leave. If the employee fails to return to work or communicate with Robert Half Leave Administration or the office after the expiration of an approved leave, Robert Half will assume the employee has voluntarily terminated employment and process a termination for failure to return from leave.
Returning to Work

Before you return to work from a leave, you need to notify your manager of your expected return to work date. Robert Half Leave Administration will also send you a reminder letter a week before your expected return date advising you to contact Leave Administration to report your return to work. If the leave is for your own serious health condition, you may be required, prior to reporting to work, to provide a medical release from your health care provider indicating that you are fit for duty and released to return to work, with or without a reasonable accommodation. If you need a reasonable accommodation, contact HR to discuss your needs and the company’s ability to provide an accommodation. Robert Half may also require you to see a doctor designated by Robert Half prior to returning to work. If this happens, the cost of such medical examination will be paid by Robert Half.

Position Reinstatement

Upon completion of an approved Leave of Absence, an employee will be reinstated to the employee’s former position or a position that is substantially similar to the employee’s former position without reduction in pay, benefits or service. The general exception is if the position or substantially similar position ceases to exist because of legitimate business reasons unrelated to the employee’s leave.

The guarantee of position reinstatement following an approved Leave of Absence expires at the earlier of (a) the maximum time allowed for the applicable Leave of Absence or as otherwise required by law (b) if the leave is for the employee’s own medical condition, the date of release for return to work set forth in a health care provider’s note.

There is no guarantee of reinstatement to a former position for an employee on another Medical Leave or a Personal Leave of Absence.

In all cases Robert Half reserves the right not to reinstate an employee if reinstatement would cause substantial economic harm to the business.

Other Employment

An employee on Leave of Absence is not permitted to be employed by another company, even on a temporary basis, without the express written consent of Robert Half.
II. LEAVE POLICY DETAILS

Robert Half has several Leave of Absence policies, some of which are required by state or federal law leave. However, Robert Half also provides other leave types to its employees in addition to what is required by law. In this section, the following leave types are summarized with a general description:

- Family and Medical Leave (FMLA)
- Parental Leave
- Service Member FMLA
- Workers’ Comp Leave
- Medical Leave
- Military Leave
- Military Spouse Leave
- Domestic Violence Leave
- Personal Leave

Family and Medical Leave (FMLA)

FMLA is provided to eligible employees as defined by Federal Law. To be eligible, an employee must:

- have been employed by Robert Half for at least 12 calendar months and
- have worked at least 1,250 hours for Robert Half during the 12 months prior to the leave.

FMLA leave provides eligible employees unpaid leave:

- to recover from his or her own medical condition;
- to care for family members who are suffering from a serious health condition;
- to bond with newborn, newly adopted or newly placed foster children.

In some cases eligible employees may be covered by both FMLA and a state leave law for the same leave. These leave periods run concurrently unless otherwise designated by the state leave law. A copy of your FMLA Rights & Responsibilities is provided in full in the Appendix.

Robert Half reserves the right to retroactively designate leave as FMLA, in accordance with federal law.

Service Member Family Medical Leave Act (FMLA)

The Service Member FMLA is available to employees who have (a) been employed by Robert Half for 12 calendar months and (b) worked for Robert Half for at least 12 months with at least 1,250 hours in the preceding 12 months.

Service member FMLA provides eligible employees unpaid leave for either, or for a combination, of the following reasons.

- A “Qualifying Exigency” (as defined by the U.S. Department of Labor) arising out of the fact that an employee’s family member (spouse, child, parent or next of kin) is on a covered
active duty or has been called to covered active duty status in the Armed Forces, National Guard, or Reserves in support of a contingency operation. A “Qualifying Exigency” may include attending certain military events, arranging for alternative childcare, addressing certain financial and legal arrangements, attending certain counseling sessions, and attending post-deployment reintegration briefings; and/or

- To care for a covered service member who is the employee’s spouse, child, parent or next of kin, and who has incurred an injury or illness in the line of duty while on active duty in the Armed Forces including a member of the National Guard or Reserves, provided that such injury or illness may render the family member medically unfit to perform duties of the member’s office, grade, rank or rating.

(The term “next of kin”, used with respect to an individual, means the nearest blood relative of that individual)

Duration of Service Member FMLA

- When the leave is due to a “Qualifying Exigency”, an eligible employee may take up to 12 work weeks of leave during any 12-month period.
- When the leave is to care for an injured or ill service member, an eligible employee may take up to 26 work weeks of leave during a single 12-month period to care for the covered service member. Leave to care for an injured or ill service member, when combined with other FMLA-qualifying leave, may not exceed 26 weeks in a single 12-month period. This 12-month period will be measured backward from the first day leave is taken.
- Service member FMLA runs concurrent with other leave entitlements provided under federal, state and local law.

Military Leave

Robert Half allows time away from work for both reserve duty obligations and active military duty. Generally employees in a military reserve unit will take up to two weeks per year for reserve duty training.

In the event an employee is called for active duty, Robert Half complies with federal law in granting a Leave of Absence for active duty military service. Federal law allows employees to leave work to engage in active duty, active duty for training, initial active duty for training, inactive duty training, and full-time National Guard duty, whether on a voluntary or involuntary basis. Employees are allowed to leave work to participate in fitness examinations for any of the above types of duty, and if a member of the National Guard or Reserves, an employee is allowed to leave work to perform funeral honors duty. Employees will be granted leave, provided Robert Half receives advance verbal or written notice of the leave, except when such notice is precluded by military necessity, impossibility or unreasonableness.

Robert Half’s military leave is unpaid, and an employee will not accrue CTO while on military leave. Employees may elect, but are not required to, apply any available CTO accrued before the beginning of military service towards the military leave. Contact Robert Half Leave Administration to request your CTO payout. If an employee elects to take unpaid leave instead of using available CTO, the employee’s unused CTO will be retained until the employee returns from military leave.
If an employee is covered by Robert Half’s group health plan, coverage will end 30 days following the employee’s departure from Robert Half on Military Leave. An employee may elect to continue coverage for generally up to 24 months while on military service under either COBRA or USERRA.

An employee will not be paid compensation, other than any CTO the employee may elect to be paid, and will not be entitled to incentive-based compensation during a period of military leave. However, upon return to work from military leave an employee will be reemployed with the privileges and status the employee would have earned had the leave not occurred, so long as the employee meets specific reporting requirements described below. Upon return to work, Robert Half may require an employee to provide documentation establishing that the employee has reported back to work within the applicable time period and has not lost his/her entitlement to protection under federal law due to dishonorable discharge or other factors.

An employee must report back to work within a specified time frame that is determined by the length of time of the military leave.

The following table summarizes the requirements for reporting back to work from a federal military leave:

<table>
<thead>
<tr>
<th>Length of Military Leave</th>
<th>Reporting Requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 – 30 days</td>
<td>Employee must report back to work no later than the beginning of the first full regularly scheduled workday that occurs eight hours after his/her return home.</td>
</tr>
<tr>
<td>31 – 180 days</td>
<td>Application for reinstatement must be submitted by employee no later than 14 days after completion of military service.</td>
</tr>
<tr>
<td>181 or more days</td>
<td>Application for reinstatement must be submitted by employee no later than 90 days after completion of military service.</td>
</tr>
</tbody>
</table>

Generally, employees are required to return within 40 days of release from service. Please contact your HR if you need specific information about returning to work.

**Military Spouse Leave**

To request Military Spouse Leave, an employee must provide notice no later than two business days after receiving official notice that his/her spouse will be on leave from deployment. The employee must also provide written documentation certifying that his/her spouse is on leave from deployment.

**Personal Leave**

A Personal leave is intended to cover emergencies, extenuating circumstances or other personal matters not covered by any other Leave of Absence provided by Robert Half. The decision to grant a personal leave is at Robert Half’s discretion. An employee can have no expectation that a personal leave request will be approved by his or her manager. The approval of such requests is in the sole discretion of an employee’s supervisor.
A personal leave is an unpaid Leave of Absence and may not exceed four calendar workweeks without approval of Senior Management. An employee may be required to use accrued CTO during a personal leave. During an approved personal leave an employee shall retain employee status and the leave shall not constitute a break in service. An employee on personal Leave of Absence has no guarantee of job reinstatement to any position at the conclusion of the personal leave.

**Short Term Medical Leave**

The Short Term Medical leave is intended for employees who do not met the eligibility requirements under FMLA. An employee may request a Short Term Medical leave if he or she has a serious health condition due to illness or injury and is approved for Robert Half STD or LTD benefit.

Medical Certification is required in order for the leave to be approved and insurance carrier to make a determination on STD or LTD benefit. The maximum length of the Medical leave is 12 weeks in a 12-month period looking backwards beginning from the leave start date.

Although Robert Half will make every effort to make a reasonable accommodation for the employee, this leave is not job protected, unless otherwise required by law.

**Workers’ Compensation Leave**

Workers’ Compensation Leave allows an employee leave from work in order to recover from a work related injury or disability.

If an employee suffers an injury at work, the employee should make an immediate report of the incident to a supervisor. In the event of a serious or life threatening injury, an ambulance or other emergency medical assistance should be arranged for the employee. In other circumstances, the employee should visit his or her treating doctor for medical care.

Workers’ Compensation is administered through Robert Half’s insurance carrier. An employee who has suffered a work related injury, illness or disability will be required to make a claim and cooperate with Robert Half’s insurance adjuster who will investigate the claim and make recommendations regarding the administration of Workers’ Compensation benefits. An employee needs to provide work status notes to workerscomp@roberthalf.com, and the Robert Half Benefits Department will coordinate with Robert Half Leave Administration.

The Workers’ Compensation Leave will be coordinated between the employee, his or her doctor, the supervisor, the insurance claims adjuster, Robert Half Leave Administration, and the Robert Half Benefits Department. An individual who is entitled to Workers’ Compensation Leave must take that leave concurrently with leave taken under FMLA.
Florida Domestic Violence Leave – Florida Employees Only

Type of Leave: Eligible employees working in Florida are entitled to up to a total of three days of unpaid domestic violence leave within a 12-month period, if the employee, family or household member is a victim of domestic violence.

Eligibility: In order to be eligible, the employee must have worked for three months or longer and have exhausted any available Choice Time Off (CTO).

“Family or household member” means: spouses, former spouses, persons related by blood or marriage, persons who are presently residing together as if a family, or who have resided together in the past regardless of whether they have been married. With the exception of persons who have a child in common, the family or household members must be currently residing or have in the past resided together in the same single dwelling unit.

The Florida Domestic Violence Leave (“DVL”) is an unpaid leave of absence directly related to a domestic situation. Eligible employees may take DVL for any of the following reasons:

- Seek an injunction for protection against domestic violence or repeat violence, dating violence, or sexual violence;
- Obtain medical care or mental health counseling or both for the employee, family or household member to address injuries resulting from domestic violence;
- Obtain services from victims’ services organizations such as domestic violence or rape crisis center;
- Make the employee’s home secure from the perpetrator of domestic violence or finding a new home to escape the perpetrator;
- Seek legal assistance to address issues arising from domestic violence or attending or preparing for court related proceedings arising from the act of domestic violence.

The employee must provide reasonable advance notice to Robert Half of the need to take time off for any of the reasons listed above. All information related to an employee’s DVL will be kept confidential.

Hawaii Family Leave Law (HIFLL) – Hawaii Employees Only

Type of Leave: Eligible employees who work in Hawaii only may receive up to four weeks of family leave during any calendar year upon the birth of a Child of the employee or the adoption of a Child, or to care of the employee's Child, spouse or reciprocal beneficiary, or Parent with a Serious Health Condition. During each calendar year, the leave may be taken intermittently. Employees may use earned CTO during any unpaid portion of an HIFLL leave. After all earned CTO is used, the remainder of the leave may be taken as unpaid.

Eligibility: Employees who work in Hawaii and have been employed for wages by Robert Half for six consecutive months.

- "Child" for HIFLL purposes, means an individual who is a biological, adopted, or foster son or daughter; a stepchild; or a legal ward of an employee.
**LEAVE OF ABSENCE MANUAL**

- "Parent" for HIFLL purposes, means a biological, foster, or adoptive parent, a parent-in-law, a stepparent, a legal guardian, a grandparent, or a grandparent-in-law.

- "Serious Health Condition" for HIFLL purposes, means a physical or mental condition that warrants the participation of the employee to provide care during the period of treatment or supervision by a health care provider, and

  1. Involves inpatient care in a hospital, hospice, or residential health care facility; or
  2. Requires continuing treatment or continuing supervision by a health care provider.

**Illinois Family Military Leave – Illinois Employees Only**

Illinois law allows the spouse, parent, child or grandparent of a person called to military service lasting longer than 30 days pursuant to the orders of the Governor or the President to the United States to take unpaid family military leave for up to 30 days during the time federal or State deployment orders are in effect.

In order to be eligible for this leave, the employee must:

a. Have been employed by Robert Half for at least 12 months, and for at least 1,250 hours during the 12-month period immediately preceding the commencement of the leave.

b. Be the spouse, parent, child or grandparent of someone called to military service lasting longer than 30 days with the State or United States pursuant to an order of the Governor or the President of the United States.

c. Exhausted all non-CTO leave that may be granted to the employee other than disability leave.

d. Give at least 14 days advance notice of intended start date of the family military leave if the requested leave will consist of five or more consecutive work days.

e. Provide certification from the proper military authority verifying your eligibility for the family military leave requested.

During an approved unpaid family military leave, the employee's benefits will continue at the employee's expense.

Employees on an approved family military leave of absence will not receive salary but may elect to continue group insurance coverage. Employees are responsible for their portion of any premiums (normal payroll deductions) during the leave. Company paid benefits (Basic Life, AD&D, Dependent Life and LTD) will continue for employees on an approved family military leave of absence. If an employee does not return to work after an approved leave, Robert Half may, at the company's discretion, elect to seek reimbursement of the amount of premium paid during the employee's absence.

The employee will be billed monthly for his or her portion of the benefit premium. Payments are after tax and due on the first of every month. If an employee is delinquent in the payment of the premium, benefit coverage will be terminated by Robert Half if the employee fails to bring the
payments current. If coverage is terminated for lack of payment, the termination will take effect on the last day of the month in which the last payment was received.

CTO does not accrue while on an approved leave of absence. An employee may opt to use any accrued but unused CTO during an approved family military leave of absence.

Upon completion of an approved family military leave of absence an employee will be reinstated to the employee’s former position or a position that is substantially similar to the employee’s former position without reduction in pay, benefits or service. The exception is if the position or substantially similar position ceases to exist because of legitimate business reasons unrelated to the employee’s leave.

Illinois Employees Only – Victims’ Economic Security and Safety Act (“VESSA”)

Illinois law allows employees who are victims of domestic or sexual violence or who have family or household members who are victims of such violence to take time off work, without risk of discharge, discrimination, or retaliation by an employer, to:

- Seek legal assistance, including participating in court proceedings related to the violence;
- seek medical attention;
- recover from injuries;
- obtain services from a domestic violence program;
- obtain counseling;
- participate in safety planning.

The employee must provide at least 48 hours’ advance notice to the employer of the need to take time off for any of the reasons listed above. Employees are not required to provide reasonable advance notice when emergency circumstances prevent giving notice. The employer is required to maintain the confidentiality of the employee’s request to take time off.

The employer may require the employee to provide a certification to the employer within a reasonable time after an absence covered by this policy. Certification may be in the form of a police report, court order, sworn statement from the employee, or documentation from a medical professional, domestic violence advocate, attorney, member of the clergy, health provider or counselor.

An employee may use Choice Time Off (CTO), or personal leave. If an employee is eligible for FMLA leave, an employee may take FMLA leave that is otherwise available to the employee for time taken off for any of the reasons listed above. Leave under VESSA is concurrent with FMLA, but there is no length of service or minimum number of hours requirements to be eligible. The employee is entitled to 12 weeks of VESSA leave during any 12-month period.

Louisiana Maternity and Pregnancy

Louisiana provides employees who are disabled by pregnancy, childbirth, or related medical conditions with unpaid leave for a reasonable length of time, not to exceed 4 months. Up to six weeks of leave must be granted for a “normal” pregnancy, and up to 4 months for more seriously disabling pregnancies. Employees may choose to use accrued CTO during this leave.
Massachusetts Parental Leave

Massachusetts provides for up to eight weeks unpaid leave to employees with at least 90 days of service, in the event of:

(i) the birth of a child;
(ii) the adoption of a child under the age of 18; or
(iii) the adoption of a mentally or physically disabled child under the age of 23.

Employees may, at their discretion, use accrued CTO to be paid while on an otherwise unpaid parental leave. If both parents work for Robert Half, then they are only entitled to eight weeks of leave in the aggregate for the birth or adoption of the same child. Employees must notify the company in writing of any anticipated parental leave as soon as possible. If the date of disability leave is reasonably foreseeable, the employee must give at least 14 days’ notice. When an employee is ready to return to work, he or she must provide at least 14 days before his or her return date.

New Jersey Family Leave Act (NJFLA) – New Jersey Employees Only

Type of Leave: Employees who work in New Jersey are eligible for 12 weeks of unpaid leave during a 24-month period to care for a seriously ill family member or a newborn/recently adopted child. There is no coverage under NJFLA for the employee’s own serious health condition. If an employee takes FMLA leave for their own serious health condition (including pregnancy disability leave) the employee is still entitled to 12 weeks of leave during a 24-month period to care for a seriously ill family member or a newborn/recently adopted child. The 24 month period begins on the first day of the employee’s first NJFLA leave.

Eligibility: Employees who work in New Jersey and have been employed by Robert Half for at least 12 months and worked at least 1,000 hours\(^1\) during the preceding 12-month period.

- **“Child”**, for NJFLA purposes, means a biological, adopted, or resource family child\(^2\), stepchild, legal ward, or child of parent who is:
  - under 18 years of age; or
  - 18 years of age or older but incapable of self care due to a mental or physical impairment.
- **“Family member”**, for NJFLA purposes, means a child, parent or spouse of employee.
- **“Parent”**, for NJFLA purposes, means a biological parent, adoptive parent, resource family parent, step-parent, parent-in-law or legal guardian, having a “parent-child relationship” with a child as defined by law, or having sole or joint legal or physical custody, care or guardianship, or visitation with a child.

Leave Rules for NJFLA

An eligible employee is entitled to a family leave of 12 weeks in any 24-month period upon advance notice to Robert Half. In the case of a family member who has a serious health condition, leave may be taken intermittently when medically necessary, if:

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1 For eligibility purposes, any time an employee on military leave would have worked but for military leave needs to be counted as time worked (i.e. part of the 1,000 hours).
2 This is the same as a “foster” child/parent but in NJ they are called “resource” child/parent.
(a) The total time within which the leave is taken does not exceed a 12-week period for each serious health condition episode;

(b) The employee provides Robert Half prior notice of the leave in a manner which is reasonable and practicable; and

(c) The employee makes a reasonable effort to schedule the leave so as not to disrupt unduly the operations of Robert Half.

Leave taken because of the birth or placement for adoption of a child may commence at any time during the first 12 months after the date of the birth or placement for adoption. The leave may be taken intermittently for the birth or adoption of a healthy child if agreed to by both Robert Half and the employee.

If leave is for the care of a seriously ill family member, certification by a health care provider is required. If leave is for the birth or placement of a child, a certification need only state the date of the birth or date of placement, whichever is appropriate.

An employee may take leave on a Reduced Leave Schedule (i.e. the employee works less than the normal number of hours per work week but still works the usual number of hours per work day) except that:

(1) The employee is not entitled to a reduced leave schedule for a period exceeding 24 consecutive weeks; and

(2) The employee is not entitled to take leave on reduced leave schedule without an agreement between the employee and Robert Half if the leave is taken upon the birth or adoption of a healthy child.

During any period of NJFL, an employee may not perform services on a full-time basis for any person for whom the employee did not provide such services immediately prior to the commencement of the leave.

**Family Leave Insurance provisions of the New Jersey Temporary Disability Benefits Law (FLI)**

New Jersey provides up to six weeks (42 days) of partially-paid family leave in any 12-month period. Benefits are payable to covered employees from either the New Jersey State Plan or an approved employer-provided plan.

**Eligibility Requirements:**

- Leave is available for care of a new child at any time during the first 12 months after birth, adoption or placement for adoption.

  Child means a biological, adopted, or foster child, stepchild or legal ward of a covered individual, child of a domestic partner of the covered individual, or child of a civil union partner of the covered individual, who is less than 19 years of age or is 19 years of age or older but is incapable of self-care because of mental or physical impairment.

- Leave is available to care for a seriously ill parents, spouses, civil union or domestic partners or children (including the child of a spouse, civil union or domestic partner), as certified by a health care provider.
New Jersey Family Leave Insurance Plan (FLI)

Claims may be filed for consecutive weeks, for intermittent weeks, or for intermittent days during a 12-month period, beginning with the first date of the claim. To file a claim for FLI, employees are required to give at least 30 days prior notice, except when unforeseeable circumstances prevent prior notice, for care of a child after birth or adoption. If FLI leave is for the care of a sick family member, the employee is required to schedule, when possible, the leave in a manner to minimize disruption of the employer operations, and give, if possible 15 days prior notice for leave which is intermittent.

Employees covered under the New Jersey FLI Plan can obtain information pertaining to the program and an application for Family Leave Insurance benefits (Form FL-1), by visiting the New Jersey Department of Labor and Workforce Development’s web site at www.nj.gov/labor, by telephoning the Division of Temporary Disability Insurance’s Customer Service Section at 1.609.282.7060, or by writing to the Division of Temporary Disability Insurance, P.O. Box 387, Trenton, NJ 08625-0387.

If an employee is receiving State Plan temporary disability benefits for pregnancy, after the child is born, the Division will mail the employee information on how to file a claim for Family Leave Insurance Benefits to bond with the newborn child. If a claim is filed for Family Leave Insurance, benefits will begin immediately after the employee recovers from her pregnancy-related disability. No waiting period is required since she was paid for her pregnancy-related disability claim.

Robert Half will notify the employee if the company determines the employee will not be reinstated because either the employee’s job cannot be temporarily filled or the employee has used TMLA to search for other employment or has worked for another employer.

*TMLA leave is not available at any job sites or locations where Robert Half employs fewer than 100 full time employees.

Rhode Island Pregnancy Accommodation

Under the Rhode Island Fair Employment Practices Act, employees and applicants have the right to request a reasonable accommodation for conditions related to pregnancy, childbirth, and related conditions. Robert Half will provide a reasonable accommodation to applicants and employees in the State of Rhode Island who require an accommodation due to pregnancy, childbirth, and/or a related condition. This state law protects employees and applicants from discrimination based on pregnancy, childbirth and related conditions. Examples of reasonable accommodations for pregnancy, childbirth, and related conditions are: more frequent or longer breaks, modification of the employee’s work area, a temporary transfer to light-duty, leave of absence, a private area to express breast milk. Robert Half may not:

- refuse to grant employees and applicants the reasonable accommodation unless it would create an undue hardship on the employer's enterprise, business or program;
- require employees to take a leave if another reasonable accommodation can be granted; or
- deny employees and applicants employment opportunities based on a refusal to provide a reasonable accommodation.
Employees who wish to request accommodation due to pregnancy or a pregnancy related condition or impairment, may contact their supervisor, manager or contact the Reasonable Accommodation number: (866) 368-0718.

If an employee has been the victim of discrimination based on pregnancy, childbirth or related conditions and/or denial of a reasonable accommodation, please contact: Rhode Island Commission for Human Rights

180 Westminster Street, 3rd Floor
Providence, RI 02903
(401) 222-2661
TTY: 401-222-2664
www.richr. ri.gov

Tennessee Maternity Leave Act (TMLA) - Tennessee Employees Only

Tennessee provides an employee who has been employed for at least 12 consecutive months as a full time employee up to four (4) months of unpaid leave ("TMLA leave") for the purpose of adoption, pregnancy, childbirth and nursing the infant, where applicable*. TMLA leave for adoption shall begin at the time an employee receives custody of the child.

Notice: An employee must provide RHI at least three (3) months’ advance notice of the employee’s anticipated date of departure for TMLA leave, the length of TMLA leave, and the employee’s intention to return to full-time employment upon the conclusion of such TMLA leave. 3 months’ notice is not required when an employee is prevented from providing advance notice because of a medical emergency necessitating that leave begin earlier than originally anticipated or because the notice of adoption was received less than three (3) months in advance.

If the employer cannot temporarily fill the employee’s position because the employee’s job position is so unique, then RHI may elect not to reinstate the employee upon conclusion of TMLA leave.

TMLA leave is not available at any job sites or locations where RHI employs fewer than 100 full time employees.
APPENDIX

RIGHTS AND RESPONSIBILITIES UNDER FMLA
Your Rights to Family and Medical Leave

The Federal Family and Medical Leave Act of 1993 (FMLA) and the corresponding state laws, require covered employers to provide up to 12 weeks of unpaid, job-protected leave to “eligible” employees for certain family and medical reasons. Employees are eligible if: (1) they have worked for a covered employer for at least one year and for 1,250 hours during the previous 12 months (in Oregon, this is 180 days and 25 or more hours per week), and (2) if there are at least 50 employees within 75 miles (in Oregon, this is 25 or more employees in that state).

Four states have separate pregnancy leave laws. The California Pregnancy Disability Leave Act (PDLA) and Louisiana Pregnancy Disability Act (LPDA) requires covered employers to provide up to four months per pregnancy of unpaid, job-protected leave to “eligible” employees for disability related to childbirth, pregnancy or related medical conditions. In Oregon (OFLA) and Washington (WFLA), 12 weeks of leave in addition to FMLA may be available for pregnancy related disabilities. Leave duration depends upon your actual period(s) of disability, which must be certified by your physician.

If you are FMLA (or the state equivalent), PDLA, LPDA, OFLA, or WFLA eligible, you have certain rights to take both a pregnancy disability leave and a family leave to care for your child.

Leave will be combined as permitted by the law. See Robert Half Leave Administration regarding leave coordination.

REASONS FOR TAKING LEAVE

Unpaid leave must be granted for any of the following reasons:

- for a serious health condition that makes the employee unable to perform any of the essential functions of the employee’s job. This would include pregnancy related disabilities (California, Louisiana, Oregon and Washington separate pregnancy leave may be granted under the appropriate state laws, while all other states may grant leave under FMLA).

- to care for the employee’s spouse, son or daughter, or parent who has a serious health condition. For Oregon employees only, to care for the employee’s parent-in-law who has a serious health condition and to care for a sick child with a non-serious health condition; or

- to care for the employee’s child after birth or placement for adoption or foster care.

- a “Qualifying Exigency” arising out of a family member’s covered active duty or call to covered active duty in the Armed Forces in support of a contingency plan; and/or

- to care for a covered family member who has incurred an injury or illness in the line of duty while on active duty in the Armed Forces provided that such injury or illness may render the family member medically unfit to perform duties of the member’s office, grade, rank or rating.
"Serious health condition" means an illness, injury, impairment, or physical or mental condition that involves either:

(1) any period of incapacity or treatment connected with inpatient care (i.e., an overnight stay) in a hospital, hospice, or residential medical-care facility, and any period of incapacity or subsequent treatment in connection with such inpatient care; or

(2) continuing treatment by a health care provider which includes any period of incapacity (i.e., inability to work, attend school or perform other regular daily activities) due to:

   (a) a health condition (including treatment therefore, or recovery there from) lasting more than three consecutive days, and any subsequent treatment or period of incapacity relating to the same condition, that also includes:

       • treatment two or more times by or under the supervision of a health care provider; or

       • one treatment by a health care provider with a continuing regimen of treatment; or

   (b) pregnancy or prenatal care. A visit to the health care provider is not necessary for each absence; or

   (c) a chronic serious health condition which continues over an extended period of time, requires periodic visits to a health care provider, and may involve occasional episodes of incapacity (e.g., asthma, diabetes). A visit to a health care provider is not necessary for each absence; or

   (d) a permanent or long-term condition for which treatment may not be effective (e.g., Alzheimer's, a severe stroke, terminal cancer). Only supervision by a health care provider is required, rather than active treatment; or

   (e) any absences to receive multiple treatments for restorative surgery or for a condition which would likely result in a period of incapacity of more than three days if not treated (e.g., chemotherapy or radiation treatments for cancer).

Leave restrictions may apply; consult Robert Half Leave Administration should specific questions arise. At the employee or employer’s option, certain types of paid leave may be substituted for unpaid leave.

ADVANCE NOTICE AND MEDICAL CERTIFICATION

The employee may be required to provide advance leave notice and medical certification. Taking of leave may be delayed or denied if requirements are not met.

• The employee ordinarily must provide 30 days’ advance notice when the leave is “foreseeable.” Otherwise notify your employer as soon as you learn of the need to take a leave.
• An employer may require medical certification to support a request for leave, and may require second or third opinions – at the employer’s expense – and a fitness-for-duty report to return to work. You have 15 days from the request to provide the certification when one is requested.

• If the employer has reason to doubt the validity of the certification provided by the employee, the employer may require the employee to obtain a second opinion from a doctor of the employer’s choosing at the employer’s expense. If the employee’s health care provider and the doctor providing the second opinion do not agree, the employer may require a third opinion, also at the employer’s expense, performed by a mutually agreeable doctor who will make a final determination.

Consult with Robert Half Leave Administration for more details on the leave process.

INTERMITTENT AND REDUCED LEAVE

Depending upon the type of leave you are requesting, an intermittent leave, reduced work schedule, or temporary alternate work assignments may be permissible, when medically necessary and with proper medical certification.

JOB BENEFITS AND PROTECTION

Generally, for the duration of your family or medical leave, the employer must maintain and pay for the employee’s health coverage under any “group health plan” at the same level and under the same conditions as coverage is provided when the employee is not on leave. For state mandated pregnancy leave in California, Louisiana, Oregon and Washington, company policy regarding benefits during leave will be followed. If applicable, arrangements will be made for employees to pay their share of health insurance premiums.

• In some instances, the covered employer may recover premiums it paid to maintain health coverage for an employee who fails to return to work.
• An employee shall be entitled to continue to participate in other benefit programs in accordance with the terms of those plans.
• Upon return from leave, most employees must be restored to their original or equivalent positions with equivalent pay, benefits, and other employment terms.
• The use of leave cannot result in the loss of any employment benefit that accrued prior to the start of an employee’s leave.

UNLAWFUL ACTS BY EMPLOYERS

It is unlawful for any employer to: Interfere with, restrain, or deny the exercise of any right provided under these statutes. Discharge or discriminate against any person for opposing any practice made unlawful by these statutes or for involvement in any proceeding under or relating to these statutes.
Employee Rights and Responsibilities
Under the Family and Medical Leave Act

BASIC LEAVE ENTITLEMENT

FMLA requires covered employers to provide up to 12 weeks of unpaid, job-protected leave to eligible employees for the following reasons:

- For incapacity due to pregnancy, prenatal medical care or child birth;
- To care for the employee’s child after birth, or placement for adoption or foster care;
- To care for the employee’s spouse, son or daughter, or parent, who has a serious health condition; or
- For a serious health condition that makes the employee unable to perform the employee’s job.

MILITARY FAMILY LEAVE ENTITLEMENTS

Eligible employees with a spouse, son, daughter, or parent on active duty or call to active duty status in the National Guard or Reserves in support of a contingency operation may use their 12-week leave entitlement to address certain qualifying exigencies. Qualifying exigencies may include attending certain military events, arranging for alternative childcare, addressing certain financial and legal arrangements, attending certain counseling sessions, and attending post-deployment reintegration briefings.

FMLA also includes a special leave entitlement that permits eligible employees to take up to 26 weeks of leave to care for a covered service-member during a single 12-month period. A covered service-member is a current member of the Armed Forces, including a member of the National Guard or Reserves, who has a serious injury or illness incurred in the line of duty on active duty that may render the service-member medically unfit to perform his or her duties for which the service-member is undergoing medical treatment, recuperation, or therapy; or is in outpatient status; or is on the temporary disability retired list.

BENEFITS AND PROTECTIONS

During FMLA leave, the employer must maintain the employee’s health coverage under any “group health plan” on the same terms as if the employee had continued to work. Upon return from FMLA leave, most employees must be restored to their original or equivalent positions with equivalent pay, benefits, and other employment terms.

Use of FMLA leave cannot result in the loss of any employment benefit that accrued prior to the start of an employee’s leave.

ELIGIBILITY REQUIREMENTS

Employees are eligible if they have worked for Robert Half for at least one year, for 1,250 hours over the previous 12 months.
DEFINITION OF SERIOUS HEALTH CONDITION

A serious health condition is an illness, injury, impairment, or physical or mental condition that involves either an overnight stay in a medical care facility, or continuing treatment by a health care provider for a condition that either prevents the employee from performing the functions of the employee’s job, or prevents the qualified family member from participating in school or other daily activities.

Subject to certain conditions, the continuing treatment requirement may be met by a period of incapacity of more than three consecutive calendar days combined with at least two visits to a health care provider or one visit and a regimen of continuing treatment, or incapacity due to pregnancy, or incapacity due to a chronic condition. Other conditions may meet the definition of continuing treatment.

USE OF LEAVE

An employee does not need to use this leave entitlement in one block. Leave can be taken intermittently or on a reduced leave schedule when medically necessary. Employees must make reasonable efforts to schedule leave for planned medical treatment so as not to unduly disrupt the employer’s operations. Leave due to qualifying exigencies may also be taken on an intermittent basis.

SUBSTITUTION OF PAID LEAVE FOR UNPAID LEAVE

Employees may choose or Robert Half may require use of accrued paid leave while taking FMLA leave. In order to use paid leave for FMLA leave, employees must comply with Robert Half’s normal paid leave policies.

EMPLOYEE RESPONSIBILITIES

Employees must provide 30 days advance notice of the need to take FMLA leave when the need is foreseeable. When a 30-day notice is not possible, the employee must provide notice as soon as practicable and generally must comply with an employer’s normal call-in procedures. Employees must provide sufficient information for the employer to determine if the leave may qualify for FMLA protection and the anticipated timing and duration of the leave. Sufficient information may include that the employee is unable to perform job functions, the family member is unable to perform daily activities, the need for hospitalization or continuing treatment by a health care provider, or circumstances supporting the need for military family leave. Employees also must inform the employer if the requested leave is for a reason for which FMLA leave was previously taken or certified. Employees also may be required to provide a certification and periodic recertification supporting the need for leave.

EMPLOYER RESPONSIBILITIES

Covered employers must inform employees requesting leave whether they are eligible under FMLA. If they are, the notice must specify any additional information required as well as the employees’ rights and responsibilities. If they are not eligible, the employer must provide a reason for the ineligibility.

Covered employers must inform employees if leave will be designated as FMLA-protected and the amount of leave counted against the employee’s leave entitlement. If the employer determines that the leave is not FMLA-protected, the employer must notify the employee.
UNLAWFUL ACTS BY EMPLOYERS

FMLA makes it unlawful for any employer to:

- Interfere with, restrain, or deny the exercise of any right provided under FMLA;
- Discharge or discriminate against any person for opposing any practice made unlawful by FMLA or for involvement in any proceeding under or relating to FMLA.

ENFORCEMENT

An employee may file a complaint with the U.S. Department of Labor or may bring a private lawsuit against an employer.

FMLA does not affect any Federal or State law prohibiting discrimination, or supersede any State or local law or collective bargaining agreement which provides greater family or medical leave rights.

FMLA section 109 (29 U.S.C. § 2619) requires FMLA covered employers to post the text of this notice. Regulations 29 C.F.R. § 825.300(a) may require additional disclosures.

LEAVE QUESTIONS

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<tr>
<th>Robert Half Employees</th>
<th>Salaried Professional Employees</th>
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<tbody>
<tr>
<td>Call Leave Administration</td>
<td>Call or Email Benefits Operations</td>
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<tr>
<td>1.855.744.6947</td>
<td>1.888.677.6613</td>
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<tr>
<td>1.855.RHI.MYHR</td>
<td><a href="mailto:benefits@roberthalf.com">benefits@roberthalf.com</a></td>
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<td>(Monday through Friday from 9 am to 7 pm CT)</td>
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