

UC SANTA BARBARA

Academic Services

Graduate Division

Parenting Accommodations for Graduate Students



Parenting Accommodations Packet for Graduate Students at UCSB

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Children's Center Home

The *Orfaea Family Children's Center*, located on West Campus, and the *University Children's Center*, located in the Student Resource Building, provide child care for student, staff and faculty families within the University community. Community families are also welcome. The Centers are [accredited](#) by the National Academy of Early Childhood Programs and are licensed by the State Department of Social Services. Infant and toddler classrooms care for children ages 3 months to 3 years in small, intimate groups.



These classrooms provide children with primary caregivers and a gentle loving environment. Children 3 to 5 years of age are cared for in mixed-age classrooms. The relationships within the classroom community both with peers and teachers are valued. All classrooms offer a rich variety of spaces, materials and activities organized to promote children's active exploration and allow for mastery in all realms of development: social, emotional, physical, cognitive and creative.

The goals of the program reflect an abiding sense of respect for all children, their unique cultures and individual development. Close ties with families are valued to ensure the best quality care possible. Parents are encouraged to be active in the program by serving on the [Parent Council](#), spending time in their child's classroom, attending parent education meetings, joining support groups and most of all, communicating on a regular basis with their child's teacher. In addition, [resource and referral services](#) are available to all University families for individual family needs.

Interested parents are advised to put their child's name on the [waitlist](#) and ask about our [tuition subsidies](#) for low-income families.

Facility #: 421708882, 421709944, 426206965, 426211959, 426211960

Contact us: [Administrative Directory](#)
Phone: (805) 893-3665
FAX: (805) 893-4907
E-mail: childrenscenters@sa.ucsb.edu

UCSB Early Childhood Care and Education Services WAITING LIST FORM

Priority Date: _____ (Office use only)

Child Information

First Name:	Last Name:	<input type="checkbox"/> Girl <input type="checkbox"/> Boy
Birthdate (Due Date):	<input type="checkbox"/> Sibling Enrolled, Name:	
<input type="checkbox"/> Unknown		

Office Use Only:

Last Name: _____

Start Date: _____

Classroom: _____

Schedule: _____

Preferred Entry Date: _____

Parent 1 Information

Last Name:	First Name:	
Street Address:		
City:	State:	Zip:
Work Phone:	Cell Phone:	
Relationship to Child:	Email:	

Parent 2 Information

Last Name:	First Name:	
Street Address:		
City:	State:	Zip:
Work Phone:	Cell Phone:	
Relationship to Child:	Email:	

Relationship to University

Parent 1: <input type="checkbox"/> Undergraduate Student <input type="checkbox"/> Graduate Student <input type="checkbox"/> Post Doc <input type="checkbox"/> Staff <input type="checkbox"/> Faculty <input type="checkbox"/> None	Parent 2: <input type="checkbox"/> Undergraduate Student <input type="checkbox"/> Graduate Student <input type="checkbox"/> Post Doc <input type="checkbox"/> Staff <input type="checkbox"/> Faculty <input type="checkbox"/> None
If Student, Perm #:	If Student, Perm #:
If Faculty/Staff/Post Doc, ID #:	If Faculty/Staff/Post Doc, ID #:
If Faculty, appointment type: (for data collection purposes only) <input type="checkbox"/> Junior (non-tenured) <input type="checkbox"/> Non-Junior (Tenured)	If Faculty, appointment type: (for data collection purposes only) <input type="checkbox"/> Junior (non-tenured) <input type="checkbox"/> Non-Junior (Tenured)

Check All Desired Placements: Full Time Half Time
 M-F MWF TTh

Please remit \$25.00(Post Doc/Staff/Faculty/Community) or \$15.00(Student) to place your child's name on the waitlist.
The waitlist fee is *non-refundable*. Make check payable to: UC Regents.

Early Childhood Care & Education Services
University of California at Santa Barbara
Santa Barbara, CA 93106-1060

Childrenscenters@sa.ucsb.edu

Office Use Only:

Amt Paid: _____

[DOWNLOAD WAITLIST FORM](#)

UCSB Family Student Housing

Information on the Family Student Housing

8/24/2018

Family Student Housing: General Information | UCSB Housing, Dining & Auxiliary Enterprises

FAMILY STUDENT HOUSING provides a limited number of one- and two-bedroom, single-family units for full-time UCSB students. The apartments are rented on a month-to-month basis and are located in two separate complexes approximately 1 mile from the main campus. Non-traditional and extended families are welcome. Families with children are given priority.

Application Process

- Available **on-line** and can be completed anytime, including prior to admittance to the university
- Priority given to families with children; otherwise, vacancies are filled in order by the date of application and desired move in date
- Families with children can expect to wait 3-6 months or less
- Families without children wait 6-12 months
- Future renovation projects may extend the normal waiting periods

Eligibility

- A "family" is defined as an established long-term relationship with an exclusive mutual commitment in which members share the necessities of life and on-going responsibility for their common welfare. Eligible family members include:
 - Your child(ren)
 - Your spouse
 - Your domestic partner
 - Your family member approved to be eligible by Apartment Assignment Services

Students must reside with at least one eligible family member on a permanent, full-time basis for Family Student Housing. Documentation of eligibility is required. An interview will be conducted to determine your family eligibility.

Other family members may reside with you in the apartment providing at least one family member defines your eligibility. Roomers or boarders are not allowed to share apartments with tenants.

Furnishings & Facilities

- Kitchens are equipped with wood cabinets, a gas stove, exhaust fan, electric refrigerator and garbage disposal. Appliances other than those furnished are not permitted.
- Bathrooms have a tub-shower unit, wash basin, toilet and medicine cabinet.
- High-speed internet access via cable modem is included in all apartments.
- Parking is limited to one space per apartment. Permits for a second-vehicle are limited and only available through a waiting list process. A permit may be purchased to park your second car in one of our other facilities.
- Schools are located from one block to three miles away.
- An exercise room in the Santa Ynez apartment complex is available to all residents of Family Student Housing with a small membership fee.
- Gardening plots are available in a community vegetable garden.
- Playgrounds, volleyball, basketball and baseball courts are available to all residents.
- Community Centers are available for study and recreation.
- Recycling is supported and encouraged.
- In-Residence Staff: Apartment Living Coordinator, Apartment Living Assistant Coordinator and seven Resident Assistants (RAs)

Personal Property Insurance

- The University of California strongly recommends renters insurance for all students. Renters insurance provides valuable protection if your personal belongings are stolen or damaged, including laptop computers, smartphones, bicycles, game consoles, textbooks, clothing and other personal items. If your laptop or other valuables are stolen or damaged, you are responsible for replacing them, not the school. Renter's insurance may also protect you financially for unintentional damage to the apartment or bodily injury for which you are liable. This GradGuard insurance policy was designed for University of California students. Or, you can check with your family's homeowner's or renter's insurance policy to see if you are covered. If you don't have your housing assignment when you sign up, please use the following address:

www.housing.ucsb.edu/family-student-housing-general-information scenter.sa.ucsb.edu

LEAVE OF ABSENCE (LOA)

*Deadlines are posted on the Registrar's [Calendars & Deadlines](#) as well as on the [Graduate Division](#) calendar
For more information, please read the [Leave of Absence](#) section of Graduate Division's website*

Graduate students are required to maintain continuous registration until all degree requirements are completed, although a leave of absence may be considered for the following reasons:

- **Medical/health difficulties**
- **Parenting/Pregnancy** needs during the first 12 months after the child's birth or placement in the home
- **Emergencies** in the immediate family
- **Armed Service/Military duties** required by the government of the student's home country
- **Filing quarter** –requires submission of a [Filing Leave of Absence Petition](#)

Eligibility Criteria

- Must have been registered* the preceding academic quarter unless requesting to extend a current leave
- A Medical leave requires a note, including recommended leave duration, from physician (licensed medical doctor, doctor of osteopathy, or licensed clinical psychologist)
- A Parenting/Pregnancy leave requires note from physician (prior to birth) *and* copy of birth certificate (after birth or adoption)
- An Armed Service/Military leave requires governmental documentation

**If on approved leave or lapsed spring quarter, to be eligible for fall quarter Filing leave, students must register in a minimum of four units during one [Summer Session](#).*

Terms and Conditions of a Leave of Absence

Students may be granted up to *a maximum of three quarters* of non-Filing leave.

LOA Requests submitted after the posted deadline may be granted by exception.

International Students must secure approval from the Office of International Students and Scholars (OISS) before applying for *any* leave of absence.

Financial Aid may be affected by taking a leave of absence. Please contact the [Financial Aid Office](#) with any questions about your aid status while on leave.

Students absent for a period longer than that covered by an approved leave of absence must file a [Reinstatement Petition](#) in order to register. Reinstatement is subject to the approval of the department and the Graduate Division.

Students are *not eligible* to:

- Hold student academic appointments (TA, GSR, Reader, Tutor) or other student appointment titles
- Receive most forms of University financial support
- Be exempt from payment of loans (check with loan agency)
- Have continued borrowing privileges at the UCSB Library
- Have student MTD bus privileges
- Obtain student parking privileges from UCSB Transportation & Parking Services

Students may *be eligible* to:

- Access Student Health Services on a fee-for-service basis (without graduate student health insurance)
- Purchase [graduate student health insurance](#) for a maximum of 2 quarters of leave; enrollment is NOT automatic, must enroll online by the first day of the quarter (voluntary enrollment periods on [GHI website](#))
- Negotiate with the [Office of Housing and Residential Services](#) to remain in student housing
- Use the [Recreation Center](#) for a fee
- Use [Career Services](#)
- Place children in the [University Children's Center](#)

GRADUATE DIVISION
UNIVERSITY OF CALIFORNIA, SANTA BARBARA

3117 CHEADLE HALL
SANTA BARBARA, CA 93106-2070

LEAVE OF ABSENCE PETITION

Please read the [Leave of Absence](#) section of Graduate Division's website
A copy of the processed petition will be sent via email to student and department

Name: _____ Perm: _____ International Student VISA: _____
Must obtain OISS signature below

UMail: _____ Major: _____ Degree Objective: _____

I have fellowship funding: Yes No If yes, source: _____

CENTRAL FELLOWS MUST ALSO COMPLETE THE REQUEST FOR [Change in Fellowship Schedule form](#)

I am requesting the below leave for the following quarter(s): Fall _____ Winter _____ Spring _____
Year Year Year

- MEDICAL** (attach physician's note)
- PARENTING/PREGNANCY** (attach physician's note if prior to birth and copy of birth certificate after birth or adoption)
- ARMED SERVICE/MILITARY** (attach governmental orders)
- FAMILY EMERGENCY** (provide explanation below or attach a separate page)

I have read the leave of absence information and understand the terms and conditions associated with being on leave. By checking below, I acknowledge that during my approved leave quarter(s):

- I was registered* the academic quarter preceding this leave request, or am requesting leave extension from previous quarter.
- I am not eligible to, and will not hold a student academic title (TA, GSR, Reader, Tutor) or other student employment.
- I am not entitled to use any University services supported by registration fees.
- I may be eligible to purchase graduate student health insurance and understand that enrollment is NOT automatic, must enroll online by the first day of the quarter (voluntary enrollment periods on [GHI website](#)).
- I have attached the Cashier's Office (1212 SAASB) receipt for payment of the non-refundable \$20.00 petition fee.

Student's Signature _____ **Date** _____

**If on approved leave or lapsed spring quarter, to be eligible for fall quarter Filing leave students must register in a minimum of four units during one [Summer Session](#).*

GRADUATE PROGRAM APPROVAL

I have read the LOA Terms and Conditions, and certify that the above graduate student is eligible for a leave of absence:

Department Chair or Graduate Advisor: _____
Type or Print Name Signature Date

OISS Representative: _____
Type or Print Name Signature Date

GRADUATE DIVISION:

- Approve
- Deny

Signature Date

Non-refundable \$20.00 petition fee:

GD Notes: _____

(rev. 3.2018 J:\Academic\FORMS, letters, check sheets\FORMS and Petitions)

Employment Leave of Absence

Information on Employment Leave of Absence Policy

Parenting-Related Employment Accommodation Policies & Benefits

Graduate students who are employed as [Academic Student Employees \(ASEs\)](#) or [Graduate Student Researchers \(GSRs\)](#) are eligible for limited paid and unpaid leave options related to pregnancy, childbirth, and parenting. Additionally, ASEs and GSRs may apply for reimbursement of some eligible childcare expenses. All of the policies and benefits outlined on this page are administered by the UCSB Academic Personnel office.

Guiding Principles

The Parenting Accommodation Policy for Graduate Students is by no means designed to replace the communication and cooperation between student and advisor, and the good-faith efforts of both to accommodate the arrival of a new child in the home by birth, adoption, or foster placement, or the care of a child with a serious illness. It is the intention of this policy to reinforce the importance of that cooperation, and to provide support where needed to make that accommodation possible.

See also the [Parenting Accommodation Policy for Academic Accommodations](#)

Employment Accommodations

UAW Academic Student Employee Contract Specifications

Academic Student Employees are represented by the UAW-2865 union, whose contract with the University of California includes information related to paid and unpaid leave options for pregnancy, childbirth, and parenting. Please refer to [Article 17](#) of the current contract for more information. You may also view the [full contract here](#).

See also this [chart from Academic Personnel](#) that summarizes information about different types of ASE leaves, including leave related to pregnancy, childbirth, and parenting.

Accommodations for New Parents Employed as a Graduate Student Researcher (GSR Title)

The following financial accommodation is available from the Graduate Division, dependent on the availability of funding.

Note: Students with an ASE appointment are supported through the UAW process, which is administered by the student's department. Students supported by university fellowships will experience no change in their funding during parenting accommodation within a quarter (does not apply to a formal leave of absence). Students who do not already hold a fellowship or graduate student research academic or leave appointment will not receive support under this provision.

A Graduate Student Researcher (GSR) shall be eligible to receive up to six (6) weeks of paid leave for pregnancy, childbirth or related medical conditions for the period prior to, during, and after childbirth. A GSR will be approved for up to two additional weeks of unpaid leave for baby bonding, though the leave cannot be continued beyond the end date of the GSR's appointment.

For most GSR assignments, with advance planning, we encourage the principal investigators to consider modified assignments and/or reduced activity to accommodate the physical limitations during pregnancy and childbirth. For example, principal investigators may continue to support students while they are writing or otherwise preparing the development or defense of a dissertation. Such activity is typically an allowable expense on a research grant or contract if the student has already been funded to do the work related to that project.

If it is necessary to hire a replacement while the GSR is on parenting accommodation or if the grant disallows payment during the accommodation periods, the Graduate Division will work with the PI to ensure that the parent's funding is maintained.

Childcare Reimbursement Program

Graduate Student Researchers (GSRs) and Academic Student Employees (ASEs) at the University of California, Santa Barbara, are eligible for reimbursement of some child-care expenses through programs established by the UC Office of the President and administered on the UC campuses. Each eligible GSR and ASE may receive up to \$1,100 per quarter for expenses incurred during the GSR's or ASE's appointment period during the regular academic year. A student must have a valid GSR or ASE appointment for a minimum of 25% time for the duration of the period for which the reimbursement is submitted.

In addition, a GSR or ASE who meets the eligibility criteria for a summer session appointment can be reimbursed up to \$1,100 for eligible expenses incurred during the summer session term. The \$1,100 maximum applies regardless of the number of summer terms a GSR or ASE may work in a calendar year. To be eligible for reimbursement during the summer term, the GSR or ASE must also be a registered student in the regular academic terms preceding and following the summer session appointment.

For more information, please refer to the [Childcare Reimbursement Process Overview](#), the [Childcare Reimbursement Factsheet](#), and the [Childcare Reimbursement Form](#).

More Information

For questions related to parenting accommodations and benefits for ASEs, you may contact [Billy Ko](#) in Academic Personnel or a member of the [UAW-2865 union chapter at UCSB](#).

For questions related to parenting accommodations and benefits for GSRs, you may contact [Billy Ko](#) in Academic Personnel.

Employment Leave of Absence

UAW Contract

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Article 17 – Leaves *Revised 8/20/18*
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TA

For UC
Madeline [Signature]
8/20/18

ARTICLE 17 LEAVES

For the Union

Harriet A.
Allie Carlisle

8/24/18

[Signature]

A. MILITARY LEAVE

ASEs who are called to active military service will be provided leave from their current positions to fulfill their military obligations to the extent required by applicable law. Military leave will be paid to the extent required by applicable law **and/or applicable University policy.**

B. PREGNANCY DISABILITY LEAVE

Under the California Pregnancy Disability Leave Laws, ASEs are entitled to unpaid leave for up to four months per pregnancy and/or reasonable accommodation for pregnancy disability, childbirth, and related medical conditions. Notwithstanding the foregoing, a Pregnancy Disability Leave will not continue beyond the end date of the ASE's appointment. The University will maintain and pay for health insurance coverage (University-sponsored Student Health Insurance Plans, or other insurance for non-student ASEs, as applicable) for the duration of the leave, not to exceed four months in a 12-month period under the same conditions that coverage would otherwise have been provided by the University if the **ASE employee** had been in employment continuously for the duration of the leave.

C. SHORT-TERM MEDICAL LEAVE AND FAMILY-RELATED LEAVE

1. Upon request from an ASE, and subject to the provisions of this article, the University will grant an ASE's reasonable request for leave of absence of appropriate duration due to:

- a. personal illness and/or disability;
- b. birth, adoption, or care of a child or family member as defined below in Section H; or
- c. family emergencies:
- d. appointments and/or hearings scheduled by federal immigration officials or the U.S. Department of State with respect to immigration or citizenship status of the ASE, spouse, domestic partner, child or parent in accordance with Article 20 – Non-Discrimination In Employment Side Letter.**

2. Paid Medical Leave and Family Leave

Leaves in Section C.1. shall be paid leaves for salaried ASEs and shall be unpaid for hourly ASEs. The period of paid leave under Section C.1. shall be no more than two (2) days for ASEs appointed at 50% for a regular

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ASC

academic quarter and shall be no more than three (3) days for ASEs appointed at 50% for a regular academic semester. For ASEs who are employed for other than 50% FTE, the amount of paid leave as covered in Section C. 1. will be prorated.

3. Supplemental Short-term

Unpaid leave may be granted for periods beyond the terms of leaves in Section 2, but shall not exceed the end of the appointment period. These leaves may be paid (in whole or in part) for reasons defined in Section 1 and at the sole discretion of the department or hiring unit.

D. LONG-TERM MEDICAL LEAVE AND FAMILY-RELATED LEAVE

Upon request from an eligible ASE_{s,r} and subject to the provisions of this article, the University will grant an ASE's reasonable request for a long-term leave of absence during the academic year. Whenever possible, leave should be requested at least thirty (30) days in advance of the start date of the leave. The paid leaves described below may be combined for a maximum of six (6) weeks of paid leave during the academic year. The leave will not continue beyond the end date of the ASE's appointment.

1. Paid Leave for Pregnancy Disability, Childbirth and Related Medical Conditions

A salaried ASE shall be eligible to receive up to six (6) weeks of paid leave for pregnancy, childbirth or related medical conditions for the period prior to, during, and after childbirth. Any paid leave taken under this Section shall run concurrently with any leave taken under Section B_r pursuant to California's Pregnancy Disability Leave Laws. An ASE will be approved for up to two additional weeks of unpaid leave for baby bonding, provided such unpaid leave does not extend beyond the end date of the ASE's appointment. Unpaid leave may be granted for periods beyond the terms of leaves in this Section D, at the sole discretion of the University.

The University will not retaliate against an ASE who takes a leave under this section.

2. Other Paid Leave

A salaried ASE shall be eligible to receive up to four (4) weeks of paid leave due to the ASE's serious health condition, as defined under the Family and Medical Leave Act (FMLA), or to care for a family member of the ASE, as defined in Section H, who has a serious health condition. Additionally, this leave may be used to care for and bond with the ASE's newborn child or a child placed with the ASE for adoption or foster care, provided that the leave is taken within twelve months of the birth or placement of the child with the ASE. An ASE will be approved for up to

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ABC

two additional weeks of unpaid leave for baby bonding or for a serious health condition, provided such unpaid leave does not extend beyond the end date of the ASE's appointment. Unpaid leave may be granted for periods beyond the terms of leaves in this Section D, at the sole discretion of the University.

An ASE receiving paid leave for pregnancy disability, childbirth, related medical condition or for illness or injury from any other source within the University will not be eligible to receive paid leave pursuant to this Section.

E. BEREAVEMENT LEAVE

The University will grant an ASE's reasonable request for bereavement leave due to the death of a family member as defined in Section H. The period of leave for bereavement shall be up to three (3) days per occurrence. Salaried ASEs shall be granted up to three (3) days pay for bereavement on those days the ASE was previously scheduled to work. Nothing in this Section shall preclude departments or hiring units from granting a longer period of paid bereavement leave when they determine the need to do so.

F. JURY DUTY

An ASE shall be eligible for a jury duty leave when summoned for required jury duty service. Jury duty leave is leave with pay. Verification of actual jury duty service shall be provided by the ASE to the University upon request. Jury duty leave will not continue beyond the end date of the ASE's appointment.

G. OTHER LEAVES

Other leaves, including but not limited to leave for service to government agencies and leave to attend professional meetings may be granted with or without pay at the University's sole discretion or if required by applicable law.

H. DEFINITION OF FAMILY MEMBER

Family member is defined as one's an ASEs mother, father, sister, brother, parent-in-law, spouse, domestic partner, parent of domestic partner, grandparent, grandchild, child, step or foster child (including children of domestic partner).

I. REQUEST FOR LEAVE AND COVERAGE

In order to ensure proper coverage for leaves other than long-term leaves, ASEs are expected to contact the supervisor to request leave as soon as the need for the leave becomes known but not less than one (1) working day in advance of the commencement of the leave unless the leave is for an unanticipated personal or family illness or bereavement.

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ASE

Requests for leave shall be made in writing with information about the nature of the leave and probable duration. Upon request, the ASE will be required to provide appropriate documentation. While it is the University's responsibility to make arrangements for coverage, the ASE will assist as reasonably possible.

Employment Leave of Absence

Academic Student Employee Leave Chart

Academic Student Employee Leave Chart

For Graduate Students appointed in an ASE title (Associate, Teaching Assistant, Reader, Remedial Tutor) during the Academic Year

MEDICAL / FAMILY LEAVES		
LEAVE TYPE AND DURATION	REQUEST PROCESS	PAY STATUS
<p>SHORT-TERM LEAVE</p> <p>For the purposes of:</p> <ul style="list-style-type: none"> ▪ Personal illness and/or disability; ▪ Birth, adoption, or care of a child or family member¹; or ▪ Family emergencies. <p>2 days for ASEs appointed at 50% for the academic quarter. Pro-rated for those working less. Additional time off may be granted at the discretion of the Hiring Dept. but not to exceed the ASE's appointment end date.</p>	<p>The ASE submits a written request for leave/extension of leave to their Supervisor in a timely manner but no less than 1 working day in advance of the anticipated leave date, unless the leave is for an unanticipated personal/family illness or bereavement.</p> <p>The written request must contain the reason for the leave, the expected duration, and any supporting documentation as appropriate to the leave type.</p>	<ul style="list-style-type: none"> ➤ Paid – 2 days for salaried ASEs. Pro-rated if below appt. is below 50% time. ➤ Unpaid for hourly ASEs ➤ Unpaid for additional time off
<p>LONG-TERM LEAVE</p> <ol style="list-style-type: none"> 1. Up to 6 weeks for pregnancy, child birth or related medical conditions prior to, during and after childbirth² 2. Up to 4 weeks for personal medical illness³, care of a family member¹, parental leave⁴ <ul style="list-style-type: none"> ➤ Up to 2 additional weeks for baby bonding /personal medical illness but not to exceed the ASE appointment <p>NOTE: Leaves 1 and 2 combined may not exceed a total of 6 weeks</p>	<p>The ASE submits a written request for leave/extension of leave to their Supervisor at a minimum of 30 calendar days in advance of the anticipated begin date or as soon as possible, if the leave is unforeseeable.</p> <p>The written request must contain the reason for the leave, the expected duration, and any supporting documentation as appropriate to the leave type.</p> <p>The Hiring Dept. provides the ASE with the Leave Approval Letter.</p>	<ul style="list-style-type: none"> ➤ Paid – for leave options 1 and 2 ➤ Unpaid - for additional 2 weeks for baby bonding/ personal medical illness
<p>PREGNANCY DISABILITY</p> <p>For pregnancy and/or reasonable accommodation for pregnancy disability, childbirth, and related medical conditions.⁵</p> <p>Up to 4 months but not to exceed the ASE's appointment end date</p>	<p>For Pregnancy Disability: The Hiring Department completes the Notice of Eligibility Form and provides the ASE with the Pregnancy Disability Leave Letter (Non-FMLA Eligible)</p>	<p>Unpaid –The Hiring Dept. continues to pay the ASE's University-sponsored health insurance for the duration of the approved leave.</p>

¹ Defined as one's mother, father, sister, brother, parent-in-law, spouse, domestic partner, parent of domestic partner, grandparent, grandchild, child, step or foster child (including children of domestic partner)

² Any paid leave taken under this leave option shall run concurrently with any leave taken under the Pregnancy Disability leave pursuant to California's Pregnancy Disability Leave Laws

³ Defined by FMLA as "a serious health condition that makes the employee unable to perform the essential functions of his or her job"

⁴ To care for and bond with a newborn child or a child placed with the ASE for adoption or foster care. Leave shall be taken within twelve months of the birth or placement of the child with the ASE.

⁵ Per the California Pregnancy Disability Leave Laws

For Additional Information, See [Article 17-Leaves](#) of the ASE Memorandum of Understanding

Last Updated On: 11/2017

Employment Leave of Absence

Academic Student Employee Leave Chart

NON-MEDICAL LEAVES		
LEAVE TYPE AND DURATION	REQUEST PROCESS	PAY STATUS
<p>BEREAVEMENT</p> <p>Leave due to death of a family member⁶</p> <p>Up to 3 days per occurrence(s) on days scheduled to work. The Hiring Dept. may grant additional paid time off, if needed.</p>	<p>The ASE submits a written request for leave/extension of leave to their Supervisor in a timely manner but no less than 1 working day in advance of the anticipated leave date, unless the leave is for an unanticipated personal/family illness or bereavement.</p> <p>The written request must contain the reason for the leave, the expected duration, and any supporting documentation as appropriate to the leave type.</p>	<ul style="list-style-type: none"> ➤ Paid –up to three scheduled workdays for salaried ASEs – or longer at the discretion of the Hiring Dept. ➤ Unpaid – for hourly ASEs
<p>MILITARY</p> <p>For ASEs who are called to active US Military Service</p>		<p>Paid to the extend required by applicable law⁷</p>
<p>OTHER LEAVES</p> <p>Such leaves include but not limited to:</p> <ul style="list-style-type: none"> • Attend professional meetings • Provide services to Govt. Agencies 		<p>Not to exceed the ASE's appointment end date</p> <p>Paid or Unpaid – at the discretion of the Hiring Dept. or if required by applicable law</p>
<p>JURY DUTY</p> <p>For required jury duty service</p>		<p>The ASE notifies their Supervisor of jury duty service in advance of the service date.</p> <p>A copy of the Proof of Appearance for Jury Service for each day of service issued by the Court.</p>

⁶ Defined as one's mother, father, sister, brother, parent-in-law, spouse, domestic partner, parent of domestic partner, grandparent, grandchild, child, step or foster child (including children of domestic partner)

⁷ See Local PPS Policy 45 Military Leave - <http://www.hr.ucsb.edu/policies/leaves/local-ppsm-policy-45-military-leave>

UC encourages a family-friendly work environment

The University of California recognizes the importance and benefits of breastfeeding for both mothers and their infants.

The University provides space for lactation purposes and break periods for employees who are breastfeeding.

*University of California,
Santa Barbara*

*Human Resources
3101 Student Affairs &
Administrative Services Building
Santa Barbara, CA 93106-3160*

*Visit us Online:
[www.hr.ucsb.edu/employee-services/
lactation-accommodation-program](http://www.hr.ucsb.edu/employee-services/lactation-accommodation-program)*

UCSB

Lactation Accommodation Program

UCSB is committed to providing support and information for nursing mothers expressing milk at work.





Lactation Breaks

The University will provide lactation break periods for employees who are breastfeeding.

Generally, nursing mothers need 20-30 minutes, 2 to 3 times per day to express milk, but individual needs vary.

To accommodate an employee's desire to breastfeed or express milk at work:

- ◆ the University will provide a reasonable amount of break time;
- ◆ the time may run concurrently with an employee's paid rest break;
- ◆ a separate unpaid break time may be made available if it is not possible for the lactation break to run concurrently with the employee's existing rest period.

Lactation Rooms

The University will provide a private, secure, and sanitary area to express breast milk. Appropriate places include:

- ◆ employee's own office, or
- ◆ another office not in use, or
- ◆ any available area with a locking door offering privacy.

Restroom stalls or any non-private space is **not** appropriate. If needed, there are several lactation rooms available on campus.

Campus Lactation Rooms

- ◆ Kerr Hall
- ◆ Davidson Library
- ◆ Ellison Hall
- ◆ Noble Hall
- ◆ Student Resource Building
- ◆ Music Library
- ◆ Life Sciences Building
- ◆ Student Health (for use by Student Health Providers & Staff only)



Some rooms require a key to access, please register for more info.

Most lactation rooms are equipped with a hospital-grade Medela breast pump (personal attachments not included). Medela Lactina® "piston" required.

Breast Pumps and Supplies

- ◆ Contact your medical plan for:
 - ◇ breast pumps
 - ◇ supplies
 - ◇ breastfeeding support
 - ◇ counseling
- ◆ Purchase Medela products at the UCSB Bookstore (ext. 2335)
- ◆ Borrow a breast pump from the Lactation Accommodation Program, if available. For more information, please [Register](#) online.

Interested in the Program?

Please register!

Submit the [Registration Questionnaire](#) online:

hr.ucsb.edu/employee-services/lactation-accommodation-program

It takes less than 5 minutes to complete!

Questions?

Visit:

www.hr.ucsb.edu/employee-services/lactation-accommodation-program

Contact

Lactation Accommodation Program
Coordinator
(805) 893-4770

Childcare Grant

Purpose

The GSA Childcare Grant for Graduate Students was approved during the Spring 2011 Elections and the requirements were updated in Spring 2016 and Spring 2017 to make it more accessible. It was originally designed to promote graduate student success during certain required milestone activities of the graduate program, but it has been widened to provide general support for graduate students with children regardless of milestone or specific 'need events.'

Approved graduate students with single-child households will receive an award of \$300; graduate students with more than one child will receive an award of \$150 per additional child (\$300 for a single-child house, \$450 for a 2-child house, etc.). Grants are limited to one award per graduate student per quarter, with a maximum of five awards allowed during a student's academic tenure at UCSB.

Eligibility

The GSA Childcare Grant aims to assist UCSB graduate students who have expenses related to caring for their dependent(s).

Eligibility requirements are as follows:

- 1: Applicants must be currently registered graduate students at UCSB with dependent(s).
- 2: Applicants must provide proof of dependent(s) either in form of a copy of a birth certificate or through receipts for childcare services such as day care showing dependent(s) names as well as the applicant's name.
- 3: Grants will be limited to one award per graduate student per quarter in the amount of \$300 for the first child and \$150 per child for additional children (for example: a 1 child applicant would be eligible for \$300, a 2 child applicant \$450, and a 3 child applicant \$600).

4: Students may receive a maximum of five awards during their academic tenure at UCSB.

How to Apply

To apply, please download, complete, and email the GSA Childcare Grant Application with the following PDF attached documentation (please scan as PDF or JPEG) and email to gsavpbudget@gmail.com.

1. Proof of registration, e.g., current class schedule, unofficial transcript, or official Registrar's proof of registration.
2. Proof of dependent(s) care as either a birth certificate, adoption certificate, court order of guardianship, or receipts for childcare services showing both the dependent(s) name(s) as well as the applicant's name.

[GSA-Childcare-Grant-Application_Spring2017](#)

Deadlines

The application period opens on the 1st day of the quarter and closes on the last day of the quarter. Late applications are not accepted as final paperwork must be processed by the end of the quarter. As the application period opens at the beginning of the quarter, it is recommended to apply as early as possible to ensure timely grant disbursement.

When will my award be ready?

Awards are disbursed through the AS ticket office. Grants take anywhere from 2-6 weeks to process and you will be informed when your check is expected to be ready when your application is processed. The ticket office can be reached at [\(805\) 893-2064](tel:8058932064) to check on the status of a check.

Questions or Comments?

Questions about eligibility, payment, or other aspects of the Childcare Grant may be directed to the [VP of Budget & Finances](#).

Graduate Student Association (GSA) Childcare Grant

GSA Childcare Grant Application Form



UCSB Graduate Students Association Application Coversheet for Childcare Grant

Section I.

Full Name (Last, First):	Quarter Applying for Aid:
Home Department:	Perm Number:
Email Address:	Phone Number:
Mailing Address:	Number of Children:

Approved graduate students will receive an award of \$300 for a single-child household and \$150 per additional child for households with more than one child. Grants are limited to one award per graduate student per quarter. Registered students may receive a maximum of five awards during their academic tenure at UCSB.

IMPORTANT NOTE: The GSA is required to report all awards to the IRS and UCSB Office of Financial Aid & Scholarships. Acceptance of the GSA Childcare Grant may affect Financial Aid Loan Eligibility. Graduate students are encouraged to speak with a Financial Aid Graduate Counselor to determine what those effects may be before they apply for this grant.

Section II.

Attach the following documents to this application cover sheet. Materials must be sent as PDF files in one email to GSAVPBudget@gmail.com. **Incomplete applications will not be accepted.**

___ **Proof of registration** (Submit one of the following: a current class schedule, an unofficial transcript, or official Registrar's proof of registration)

___ **Proof of dependent(s)** (Submit one of the following: a birth certificate showing your name as parent, an adoption certificate with your name as parent, a court order of guardianship that includes your name, or official childcare receipts from a childcare facility showing both name of children and applicant).

Signature of Applicant (e-signature is acceptable):

Date:

[DOWNLOAD APPLICATION](#)

Dependent Care Flexible Spending Account (FSA)

FSA Enrollment, Change or Cancellation Salary Deduction Agreement Form

**DEPCARE FSA ENROLLMENT, CHANGE, OR CANCELLATION
SALARY REDUCTION AGREEMENT—
ACADEMIC STUDENT EMPLOYEES/GRADUATE STUDENT RESEARCHERS ONLY**
UPAY 919—ASE/GSR (W10/11) University of California Human Resources

Fill in all the pertinent information.
Shaded areas are for accounting use only. Send this form to your Accounting or Benefits Office or to the person handling benefits for your departments.

This form pertains to the Dependent Care Flexible Spending Account (DepCare FSA) program. Use this form to enroll, change your contribution, or cancel your enrollment in either plan during the calendar year.

For additional information regarding coverage effective dates, contact your Benefits Office or the person in your department who handles benefits.

DEPCARE FSA LIFE STATUS CHANGE EVENTS		ENROLL	INCREASE	DE-ENROLL	DECREASE
CHANGE IN MARITAL STATUS					
A-1	You marry and gain a dependent	YES	YES	NO	NO
A-2	You marry and your spouse is either not employed, or is enrolled in his or her own employer's dependent care FSA	NO	NO	YES	YES
A-3	You lose your spouse through death, divorce, legal separation or annulment and your spouse was enrolled in his or her own employer's dependent care FSA	YES	YES	NO	NO
GAIN OR LOSS OF A DEPENDENT					
B-1	You gain an eligible dependent (for example, through birth, adoption, or your spouse becomes incapable of self-care)	YES	YES	NO	NO
B-2	You lose an eligible dependent (for example, through death, a child reaches age 13, or a child is no longer a tax dependent)	NO	NO	YES	YES
CHANGE IN EMPLOYMENT STATUS					
C-1	Your spouse gains eligibility for and enrolls in own employer's dependent care FSA because he/she starts employment, or has an employment status change	NO	NO	YES	YES
C-2	Your spouse loses eligibility in own employer's dependent care FSA because he/she ends employment, or has an employment status change Note that in order for a married employee to be or remain eligible for DepCare, the spouse must either be employed or be looking for employment (or, if not, must be a full-time student or incapable of self-care).	YES	YES	NO	NO
COST CHANGE (DOES NOT APPLY IF PROVIDER IS YOUR RELATIVE BY BLOOD OR MARRIAGE)					
D-1	Your dependent care provider increases the cost of services	YES	YES	YES	YES
D-2	There is a decrease in provider's cost	YES	NO	NO	YES
CHANGE IN PROVIDER OR COVERAGE					
E-1	You change dependent care providers	YES	YES	YES	YES
E-2	There is a reduction in hours or cessation of dependent care (for example, a child starts attending school)	NO	NO	YES	YES
E-3A	You change (in whole or in part) from paid care to no care or free care (for example, free care by a neighbor or relative or for state-paid care)	NO	NO	YES	YES
E-3B	you change (in whole or in part) from free or no care to paid care	YES	YES	NO	NO
E-4	Your spouse starts employment	YES	YES	NO	NO
E-5	Your spouse ends employment	NO	NO	YES	YES
E-6	You or your spouse changes work schedule (for example, going from full-time to part-time or vice versa) which creates, changes or eliminates need for dependent care.	YES	YES	YES	YES
E-7	Your spouse who is not employed or looking for employment becomes a full-time student, or becomes incapable of self-care	YES	NO	NO	NO
E-8	Your spouse who is not employed or looking for employment is no longer a full-time student or is no longer capable of self-care	NO	NO	YES	NO

Dependent Care Flexible Spending Account (FSA)

FSA Enrollment, Change or Cancellation Salary Deduction Agreement Form

**DEPCARE FSA ENROLLMENT, CHANGE, OR CANCELLATION
SALARY REDUCTION AGREEMENT—
ACADEMIC STUDENT EMPLOYEES/GRADUATE STUDENT RESEARCHERS ONLY**
UPAY 919—ASE/GSR (W10/11) University of California Human Resources

Fill in all the pertinent information. Shaded areas are for accounting use only. Send this form to your Accounting or Benefits Office or to the person handling benefits for your department.

1. PERSONAL INFORMATION

NAME (LAST, FIRST, MIDDLE INITIAL)	EMPLOYEE ID NUMBER
CAMPUS/LAB	CAMPUS/LAB PHONE ()

2. EMPLOYEE ACTION—Type of Event/Contribution Election

The effective date for enrollment or change actions is the first of the month following your change or enrollment, subject to payroll deadlines. Your monthly contribution will appear on your earnings statement.

Open Enrollment—Effective date for Open Enrollment actions: January 1 of the following year.

Enter your contribution amount: DepCare FSA \$ _____/year

Your monthly contribution will be calculated by dividing the annual amount you elect by twelve monthly contributions.

Period of Initial Eligibility Enrollment (PIE)—when you enroll in the plan this calendar year because:

- you are newly hired or rehired, or
- you are hired into an appointment making you eligible for the plan(s)
- reenroll when you return from an unpaid leave of absence

Enter your contribution amount: DepCare FSA \$ _____/year

Your monthly contribution will be calculated by dividing the annual amount by the number of monthly contributions remaining in the year.

Life Status Change—Changes permissible due to these events must be on account of and correspond with the event. Check the reason you are completing the form, enter the code for the event that applies to you (refer to chart on cover page), and enter the date of the event and your contribution amount.

Type of Action Enroll Change Contribution (increase or decrease) De-enroll

DepCare FSA: Code (for example B-2): _____

DATE OF EVENT
MO / DAY / YEAR

 DepCare FSA \$ _____/year

Your monthly contribution will be calculated by dividing the annual amount by the number of monthly contributions remaining in the year.

3. SIGNATURE

My signature below indicates I have read and agree to the “Terms and Conditions” on this form. I certify under penalty of perjury that all of the above information is true to the best of my knowledge and, if applicable, that I have experienced the event and/or cost change noted above.

EMPLOYEE'S SIGNATURE	DATE
----------------------	------

FOR OFFICE USE ONLY

SYSTEM UPDATED BY	DATE	MO	COVERAGE EFFECTIVE DATE	DY	YR
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RETN: OFFICE: 5 YEARS FOLLOWING SEPARATION, EXCEPT IN CASES INVOLVING DISABILITY RETIREMENT OR DISCIPLINARY ACTION, RETAIN UNTIL AGE 70.

Dependent Care Flexible Spending Account (FSA)

FSA Enrollment, Change or Cancellation Salary Deduction Agreement Form

PRIVACY NOTIFICATIONS

STATE

The State of California Information Practices Act of 1977 (effective July 1, 1978) requires the University to provide the following information to individuals who are asked to supply information about themselves.

The principal purpose for requesting information on this form, including your Social Security number, is to verify your identity, and/or for benefits administration, and/or for federal and state income tax reporting. University policy and state and federal statutes authorize the maintenance of this information.

Furnishing all information requested on this form is mandatory. Failure to provide such information will delay or may even prevent completion of the action for which the form is being filled out. Information furnished on this form may be transmitted to the federal and state governments when required by law.

Individuals have the right to review their own records in accordance with University personnel policy and collective bargaining agreements. Information on applicable policies and agreements can be obtained from campus or Office of the President Staff and Academic Personnel Offices.

The official responsible for maintaining the information contained on this form is the Associate Vice President—University of California Human Resources, 1111 Franklin Street, Oakland, CA 94607-5200.

FEDERAL

Pursuant to the Federal Privacy Act of 1974, you are hereby notified that disclosure of your Social Security number is mandatory. The University's record keeping system was established prior to January 1, 1975 under the authority of The Regents of the University of California under Article 1X, Section 9 of the California Constitution. The principal uses of your Social Security number shall be for state tax and federal income tax (under Internal Revenue Code sections 6011.6051 and 6059) reporting, and/or for benefits administration, and/or to verify your identity.

TERMS AND CONDITIONS

By signing this form, you agree to the following terms and conditions:

- 1. You understand and accept all terms and conditions for the UC-sponsored plans in which you are enrolled as stated in the plan booklets and UC's Group Insurance Regulations.**
- 2. When you specifically ask UC representatives to intercede on your behalf with your plan administrator, you authorize the administrator to release to the UC representatives the pertinent records pertaining to you and/or your family member(s).**
- 3. You authorize deductions from your earnings to cover your monthly contributions.**
- 4. Actions you take during Open Enrollment will be effective the following January 1. Continued participation in DepCare FSA requires annual enrollment during Open Enrollment.**

Child-Care Reimbursement Program For Graduate Student Researchers (GSRs) and Academic Student Employees (ASEs)

Factsheet

Graduate Student Researchers (GSRs) and Academic Student Employees (ASEs) at the University of California, Santa Barbara, are eligible for reimbursement of some child-care expenses through a program established by the UC Office of the President and administered on the UC campuses. The UCSB Graduate Student Researchers program described below is effective beginning October 1, 2013. The UCSB Academic Student Employees program described below has been effective since July 1, 2008. The amounts increased from \$600 to \$900 upon ratification of the new UAW contract on June 21, 2014.

Program Overview

Each eligible GSR and ASE may receive up to \$900 per quarter for expenses incurred during the GSR's or ASE's appointment period during the regular academic year. An employee must have a valid GSR or ASE appointment for a minimum of 25% time for the duration of the period for which the reimbursement is submitted.

In addition, a GSR or ASE who meets the eligibility criteria for a summer-session appointment can be reimbursed up to \$900 for eligible expenses incurred during the summer-session term. The \$900 maximum applies regardless of the number of summer terms a GSR or ASE may work in a calendar year. To be eligible for reimbursement during the summer term, the GSR or ASE must also be a registered student in the regular academic terms preceding and following the summer-session appointment.

Eligibility

An eligible GSR or ASE is a registered student with at least a 25% GSR or ASE appointment who has one or more qualified dependents. For the purposes of this program, qualified dependents are children age 12 and under by July 1st and in the custody of the GSR or ASE.

Reimbursement Process

The child-care reimbursement is paid to the GSR or ASE through payroll and constitutes taxable earnings. At the end of a quarter—or when the maximum reimbursement amount has been reached within the quarter—the GSR or ASE completes a *Graduate Student Researcher (GSR) & Academic Student Employee (ASE) Child-Care Reimbursement* form and submits it with applicable child-care provider receipt(s) to the personnel officer in his or her hiring department. The form is available on the Academic Personnel website at: <https://ap.ucsb.edu/forms.and.information/GSR-ASE.child.care.reimbursment.form.pdf>

Submitting a Reimbursement Form

Requests for reimbursement of expenses must be submitted after the expenses are incurred. Reimbursement requests should be submitted no later than the last day of the following term.

Once a GSR & ASE Child-Care Reimbursement Form is submitted, the hiring department certifies that the form is complete, that the employee has had an appropriate appointment as a GSR or ASE, and that the applicable documentation is attached.

A graduate student who holds both GSR and ASE appointments during the same quarter cannot submit receipts for the same expense to the GSR & ASE Child-Care Reimbursement Program and the ASE Dependent Care Program. . The maximum amount that any student will receive as reimbursement under these two programs is \$900 per quarter.

In the case of two eligible graduate-student employees that share a dependent, they may not each request reimbursement for the same provider for the same child unless the amount paid to the provider exceeds \$900 during a given quarter. In such cases the two employees may each submit the same receipt for reimbursement; however, the total amount reimbursed will not exceed the total cost of the care. The two employees must themselves decide who will receive how much of the reimbursement and explicitly request this on the form.

The reimbursement will usually be paid out in the way that the GSR or ASE normally receives pay, i.e., by check or electronic deposit. If a GSR or ASE is no longer actively employed at the time of the reimbursement, then a paper check will be issued.

Questions and Answers

1. What is the age limit?

For the purposes of this program, qualified dependents shall include children in the custody of the ASE or GSR, who are age 12 or under on July 1st.

2. How is applicable child-care provider defined?

The child-care provider must have a valid tax I.D. or Social Security number. If the center cares for six or more dependents who are not residents, it must comply with all state and local licensing laws and applicable regulations. Child-care provided by the spouse, a child of the GSR under age 19, or someone else the GSR claims as a dependent for tax purposes is not reimbursable.

3. How will the reimbursement be taxed?

Federal tax will be withheld at 25%, state tax at 6%. Defined Contribution Plan contributions and Medicare tax will be deducted, if applicable.

4. How will I receive my reimbursement?

The reimbursement will be processed through the payroll department or college and will be provided in the same manner in which you usually receive payment, either direct deposit or a paper check. If the reimbursement is processed more than 30 days after a GSR or ASE no longer has an active appointment, then the reimbursement will probably be via a paper check.

5. Will the \$5,000 GSR & ASE Dependent Care limit be reduced by amounts reimbursed under the GSR & ASE Child Care Reimbursement program?

GSR or ASE members may participate in both child care reimbursement programs. Because the reimbursements paid to the GSR or ASE members under the GSR & ASE Child Care Program will be treated as additional wages, such reimbursements will not reduce the maximum pre-tax amount that can be deducted from the employee's paycheck under the GSR & ASE Dependent Care program.

6. Why is the child-care reimbursement taxable?

The GSR & ASE Child-Care Reimbursement Program does not meet IRS requirements as a non-taxable dependent-care program; therefore, the reimbursements under this program are treated by the IRS as additional wage income.

7. Can I claim the child-care credit on my tax form?

Potentially yes. Even though the reimbursements received under the GSR & ASE Reimbursement Program represent taxable wages to the employees, the amounts paid by the GSR or ASE employees for child-care services may be eligible for the "dependent-care services" tax credit set forth in Section 21 of the Internal Revenue Code.

The amount of the dependent-care services tax credit that can be claimed depends on the individual's adjusted gross income and cannot exceed \$3,000 for one child or \$6,000 for two or more children in any single tax year. The dependent-care services tax credit is subject to a number of different requirements. More information is available in IRS Publication 503, which can be found on the IRS website at <http://www.irs.gov/formspubs/lists/0,,id=97819,00.html>

You should consult with your tax advisor in determining whether you are eligible to claim this credit.

8. How is a 25% appointment defined for purposes of this program?

A GSR or ASE must be appointed so that over the term of the appointment the average time is at least 25%. A GSR or ASE might be appointed for 50% time for one half of the term, which would result in the average over the term being 25%.

9. Will the child-care reimbursement affect my eligibility for financial aid?

It is possible that the child-care reimbursement might impact eligibility for financial aid. It is the responsibility of the GSR or ASE to inform the appropriate agencies and offices of the child-care reimbursement.

10. Who is responsible for processing the Graduate Student Research (GSR) & Academic Student Employee (ASE) Child-Care Reimbursement form?

The hiring department, in collaboration with their college representative, will be responsible unless another department or unit has been designated by the campus. If so, the hiring department should inform the GSR or ASE when the form is submitted. If the hiring department is a research unit, the unit should work with the Divisional Dean of the PI's home department.

By authority of the Regents, University of California Human Resources, located in Oakland, administers all benefit plans in accordance with applicable plan documents and regulations, custodial agreements, University of California Group Insurance Regulations, group insurance contracts, and state and federal laws. No person is authorized to provide benefits information not contained in these source documents, and information not contained in these source documents cannot be relied upon as having been authorized by the Regents. Source documents are available for inspection upon request (1-800-888-8267). What is written here does not constitute a guarantee of plan coverage or benefits—particular rules and eligibility requirements must be met before benefits can be received. The University of California intends to continue the benefits described here indefinitely; however, the benefits of all employees, retirees, and plan beneficiaries are subject to change or termination at the time of contract renewal or at any other time by the University or other governing authorities. The University also reserves the right to determine new premiums, employer contributions and monthly costs at any time. Health and welfare benefits are not accrued or vested benefit entitlements. UC's contribution toward the monthly cost of the coverage is determined by UC and may change or stop altogether, and may be affected by the state of California's annual budget appropriation. If you belong to an exclusively represented bargaining unit, some of your benefits may differ from the ones described here. Contact your Human Resources Office for more information.

In conformance with applicable law and University policy, the University is an affirmative action/equal opportunity employer. Please send inquiries regarding the University's affirmative action and equal opportunity policies for staff to Director of Diversity and Employee Programs, University of California Office of the President, 300 Lakeside Drive, Oakland, CA 94612 and for faculty to Director of Academic Affirmative Action, University of California Office of the President, 1111 Franklin Street, Oakland, CA 94607.

Website address: atyourservice.ucop.edu

University of California
Human Resources
P.O. Box 24570
Oakland, CA 94623-1570

GSR & ASE Child-Care Reimbursement

Child-Care Reimbursement Process for GSRs and ASEs

Child-Care Reimbursement Program

Program Overview

The GSR & ASE Child-Care Reimbursement Program is a program for graduate students employed as Graduate Student Researchers or Academic Student Employees. The reimbursement will be paid through payroll as taxable earnings to the GSR or ASE. The cost of the child-care reimbursement will be charged to the GSR or ASEs' College or Division. The GSR program was established October 1, 2013 and the ASE program began July 1, 2008.

Definitions

Qualified dependent: A qualified dependent is a child who is 12 and under on July 1st. Children for whom the reimbursement is claimed must be in legal the custody of the GSR or ASE, i.e., claimed as a dependent on the GSR's or ASE's tax return.

Allowable receipts: The child-care provider must have a valid tax ID or Social Security number. If the center cares for six or more dependents who are not residents, it must comply with all state and local licensing laws and applicable regulations. Expenses incurred before the GSR or ASE appointment begins or after it ends are not eligible for reimbursement. Child care provided by the spouse, a child of the GSR or ASE under age 19, or someone else that the GSR or ASE claims as a dependent for tax purposes is not reimbursable.

1. Academic Year

- a. Each eligible GSR or ASE shall receive up to \$900 per quarter for expenses incurred during the GSR's or ASE's appointment period in the regular academic year. The reimbursable expenses and related procedures can be found on the Academic Personnel website at <https://ap.ucsb.edu/workshops.and.training/ase/>
- b. An eligible GSR or ASE is a registered student with at least a 25% GSR or ASE appointment averaged over the course of the quarter who has one or more qualified dependents.

2. Summer Session

- a. Starting with the 2014 Summer Session, eligible GSRs can receive up to \$900 in child-care reimbursements over the course of the combined summer-session terms. ASEs also continue to be eligible for this program.
- b. To be eligible for summer-session reimbursement, a GSR or ASE must be registered for the academic terms preceding and following the relevant summer session, and must hold a GSR or ASE appointment of at least 25% time for the period for which the reimbursement is requested.

Reimbursement Process

GSR or ASE Employee

1. At the end of the quarter or summer session, or when the maximum reimbursement amount has been reached during the term, the GSR or ASE downloads the 'GSR & ASE Child-Care Reimbursement form' from the Academic Personnel website at: <https://ap.ucsb.edu/forms.and.information/GSR-ASE.child.care.reimbursment.form.pdf>
2. The GSR or ASE completes the form, certifies that the appropriate program requirements are met, and submits the form and applicable child-care provider receipt(s) to the designated officer in the hiring department.
3. Reimbursement requests must be submitted after the expenses are incurred. Reimbursement requests should be submitted no later than the last day of the following term (e.g., reimbursement for Fall quarter must be submitted by the end of Winter quarter). If the reimbursement is for Spring quarter, the request must be submitted before the first day of the Fall quarter.

Note: Two GSRs or ASEs may not each claim the credit for the same provider care for an eligible child unless the provider care exceeded \$900 per quarter. The second GSR or ASE may claim the additional expense reimbursement by submitting a separate claim.

Note: Receipts for the same expense cannot be used for both the University Dependent Care Program and the Child-Care Reimbursement Program. The GSR or ASE will be required to certify on the reimbursement form that the expense is not being claimed under both programs.

Department

The hiring department personnel officer or other designated official:

1. Certifies that the form is complete, that the employee held a qualified GSR or ASE appointment for a minimum of 25% time for the duration of the period that the reimbursement is submitted for, and that the applicable documentation is attached.
2. Authorizes payment to the GSR or ASE and initiates either:
 - a. A one-time payment using the online PPS Department Time Reporting screen 'EDFT' (the DOS code 'BXC' is to be used for the reimbursement); or
 - b. A payment authorization to the designated payroll processing unit for the department, in which case the online PPS Department Time Reporting Screen 'EDFT' will be generated by that unit.
3. Retains the authorized reimbursement request form and associated receipt(s) in the employee file. Forms should be retained for a period of five years.

*Departments should contact their divisional Assistant Deans for specific procedures to request reimbursement of these costs by the Division, School, or College. For employing Research Units, procedures or reimbursement is from the Division of the PI's home Department.

Campus Payroll

GSR & ASE Child-Care Reimbursement

Child-Care Reimbursement Process for GSRs and ASEs

be in the same form as the GSR or ASE normally receives pay -- i.e., check or electronic deposit. If a GSR or ASE is no longer actively employed at the time of the reimbursement, then a paper check will be issued.

Appropriate charges to the hiring department will appear on the Distribution of Payroll Expense Report and in the General Ledger.

[DOWNLOAD REIMBURSEMENT PROCESS PDF](#)

GSR & ASE Child-Care Reimbursement

GSR and ASE Child-Care Reimbursement Form

Graduate Student Researcher (GSR) & Academic Student Employee (ASE) Child-Care Reimbursement

Submit your completed form to your hiring department personnel office.

If you are a Graduate Student Researcher (GSR) or an Academic Student Employee (ASE), use this form to request reimbursement of your eligible child-care expenses under the Graduate Student Researcher and Academic Student Employee Child-Care Reimbursement Program. For eligibility, see the *Graduate Student Researcher and Academic Student Employee Child-Care Reimbursement Factsheet*, on the Academic Personnel website.

A qualified dependent is a child who is 12 or under on July 1st and in the custody of a GSR or ASE. During the regular academic year, the reimbursement limit is \$900 per quarter. During a summer session(s), the limit is \$900 irrespective of the number of summer sessions in which a GSR or ASE is employed.

A child-care provider must have a valid tax identification or Social Security number.

Deadline

Reimbursement requests for expenses must be submitted after the expenses are incurred. Reimbursement requests should be submitted via this form based on campus-specified deadlines but no later than the last day of the following term.

Payments under this program are subject to Federal, State and FICA taxes, if applicable. Federal tax withholding will be 25 percent and state tax withholding will be 6 percent.

PERSONAL INFORMATION

EMPLOYEE'S NAME (Last, First, Middle Initial)	EMPLOYEE ID NO.	CAMPUS
ADDRESS (Number, Street)	HIRING DEPARTMENT	HOME PHONE ()
(City, State, ZIP)		WORK PHONE ()

DEPENDENTS

DEPENDENT NAME	RELATIONSHIP	BIRTHDATE
DEPENDENT NAME	RELATIONSHIP	BIRTHDATE
DEPENDENT NAME	RELATIONSHIP	BIRTHDATE

DEPENDENT CARE INFORMATION

DEPENDENT CARE PROVIDER	TAXPAYER ID NO.	DATES OF SERVICE (FROM-TO)	AMOUNT OF INCURRED EXPENSES (Attach a copy of documentation)	AMOUNT TO BE REIMBURSED
1. NAME			\$	\$
ADDRESS (Number, Street)	<input type="checkbox"/> FALL <input type="checkbox"/> WINTER <input type="checkbox"/> SPRING <input type="checkbox"/> SUMMER			
(City, State, ZIP)				
2. NAME			\$	\$
ADDRESS (Number, Street)	<input type="checkbox"/> FALL <input type="checkbox"/> WINTER <input type="checkbox"/> SPRING <input type="checkbox"/> SUMMER			
(City, State, ZIP)				
3. NAME			\$	\$
ADDRESS (Number, Street)	<input type="checkbox"/> FALL <input type="checkbox"/> WINTER <input type="checkbox"/> SPRING <input type="checkbox"/> SUMMER			
(City, State, ZIP)				
TOTAL AMOUNT TO BE REIMBURSED ▶				

EMPLOYEE'S SIGNATURE

I certify that: 1) I have incurred these expenses and have not previously requested payment for them from any source; 2) I have met all the requirements for dependent-care expenses (including those required by the Internal Revenue Code); 3) under penalty of perjury the above information is true to the best of my knowledge.

SIGNATURE (must be an original; not a photocopy)	DATE
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FOR CAMPUS/LOCATION USE ONLY—Hiring department personnel office signature at right certifies that the form is complete, that the employee has/had an appropriate appointment as an GSR and that applicable documentation is attached.	SIGNATURE	HIRING DEPARTMENT PERSONNEL OFFICE AUTHORIZES PAYMENT TO ASE AND INITIATES PAYMENTS FOLLOWING CAMPUS GUIDELINES.
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RETN: 5 years

SEE REVERSE FOR PRIVACY NOTIFICATIONS

GSR & ASE Child-Care Reimbursement

GSR and ASE Child-Care Reimbursement Form

The principal purpose for requesting information on this form, including your Social Security number, is to verify your identity, and/or for benefits administration, and/or for federal and state income tax reporting. University policy and state and federal statutes authorize the maintenance of this information.

Furnishing all information requested on this form is mandatory. Failure to provide such information will delay or may even prevent completion of the action for which the form is being filled out. Information furnished on this form may be transmitted to the federal and state governments when required by law.

Individuals have the right to review their own records in accordance with University personnel policy and collective bargaining agreements. Information on applicable policies and agreements can be obtained from campus or Office of the President Staff and Academic Personnel Offices.

The officials responsible for maintaining the information contained on this form are the Office of the President and campus Academic and Staff Personnel Managers or campus Accounting Offices.

FEDERAL

Pursuant to the Federal Privacy Act of 1974, you are hereby notified that disclosure of your Social Security number is mandatory. The University's record keeping system was established prior to January 1, 1975 under the authority of The Regents of the University of California under Article 1X, Section 9 of the California Constitution. The principal uses of your Social Security number shall be for state tax and federal income tax (under Internal Revenue Code sections 6011.6051 and 6059) reporting, and/or for benefits administration, and/or to verify your identity.

[DOWNLOAD REIMBURSEMENT FORM](#)

Time-to-Degree Extension for Parenting Demands

Request for Expanded Master's & Doctoral Time-To-Degree for Parenting Demands Policy

TIME-TO-DEGREE EXTENSION FOR PARENTING DEMANDS

For more information, please read the [Parenting Accommodation](#) section of Graduate Division's website

The time-to-degree extension policy is designed to assist graduate students who have parenting responsibilities maintain continuous student status. Formally extending time-to-degree keeps students in good academic standing through the extension period. The total time-to-degree extension allowed is one year per child, up to a total of two years.

Eligibility Criteria

- Currently registered or on an approved non-Filing leave of absence
- Responsibility of 50% or more for the child. The child may be the student's child or that of a spouse or domestic partner.
- Parenting responsibilities that include one or more of the following circumstances:
 - Childbirth
 - Care of a child 5 years old and younger
 - Newly adopted or newly-placed foster child of any age
 - Care of a child 6 years or older who requires extraordinary parenting demands, such as a child with a serious illness or other exceptional circumstances

Terms and Conditions of a Parenting Time-to-Degree Extension

- Master's students may receive an extension of up to one year for completing the master's degree.
- Doctoral students may receive an extension of up to one year:
 - To pass preliminary examinations and qualifying examinations, **or**
 - Between advancement and completion while in candidacy.
- The total time-to-degree extension allowed is one year per child, up to a total of two years.

Frequently Asked Questions

Will a parenting time-to-degree extension effect my financial support?

- Departments are not obligated to fund you beyond their original funding offer, but they may do so if funding is available.
- You remain eligible to apply for/be nominated for Central Fellowships during the extension period (as long as you are otherwise qualified for that award).

Will a parenting time-to-degree extension effect my eligibility for IDRf?

Yes, your eligibility would be extended.

Am I allowed to request a parenting time-to-degree extension if I have more than one child?

Yes, you can ask for one year of extension per child up to a maximum of 2 years.

I am an international student, will a parenting time-to-degree extension effect my visa status?

International students may need to amend their I-20s, please consult with an [OISS](#) representative.

I live in student housing, will I be allowed to stay longer if a parenting time-to-degree extension is approved?

Not necessarily. Housing contracts are not within Graduate Division's purview, you will need to contact [housing](#).

If I take a parenting leave of absence, can I also be granted a parenting time-to-degree extension for the same child?

Yes.

My child is 2 years old and I just started my PhD program. Can I apply for a parenting time-to-degree extension even though it's my first quarter at UCSB?

Yes, you can apply for the extension at any time as long as you meet the eligibility criteria.

I received a parenting time-to-degree extension prior to advancing to candidacy. Am I eligible to request an additional time-to-degree extension post advancement if my child is still age 5 or younger?

No, you can only request one extension per child.

Will a parenting time-to-degree extension also extend my P2 status?

No, P2 status is based on registered quarters so if students remain enrolled, the extension quarters will count against the [P2-to-P3 count](#). However, if a student is on an approved non-Filing leave of absence during the extension period, the leave quarters will [extend P2 status](#).

Time-to-Degree Extension for Parenting Demands

Request for Expanded Master's & Doctoral Time-To-Degree for Parenting Demands Policy

GRADUATE DIVISION
UNIVERSITY OF CALIFORNIA, SANTA BARBARA

3117 CHEADLE HALL
SANTA BARBARA, CA 93106-2070

TIME-TO-DEGREE EXTENSION REQUEST FOR PARENTING DEMANDS

Name: _____ Perm: _____ International Student VISA: _____
Must obtain OISS signature below

UMail: _____ Major: _____ Degree Obj: _____

I have 50% or more responsibility for a child/children and am requesting a time-to-degree extension for:

- One Year
 Two Years (*only if you currently have more than 1 eligible child*)

Reason:

- Childbirth, care of a child/children 5 years old or younger (*attach copy of birth certificate**)
 Care of a newly adopted or newly placed foster child/children of any age (*attach copy of adoption or foster paperwork**)
 Serious illness of a child who is 6 years old or older (*attach physician's note**)
 Other circumstance (*please explain below, attach documentation as necessary**)

I have read and understand the terms and conditions of requesting a time-to-degree extension for parenting demands:

Student's Signature _____ **Date** _____

** All birth certificates, physicians' notes, adoption paperwork, etc. will be shredded after the petition is processed*

GRADUATE PROGRAM APPROVAL

I have read the Terms and Conditions for requesting a parenting demand time-to-degree extension and certify that the above graduate student is eligible.

Department Chair or Graduate Advisor: _____
Type or Print Name Signature Date

OISS Representative: _____
Type or Print Name Signature Date

GRADUATE DIVISION New TTD Master's _____ (years) PhD Advancement _____ (years) PhD completion _____ (years)

Approve
 Deny
Signature Date

No fee

Verify major ttd from ttd table, record NEW TTD in years and quarters MA _____ ADV _____ PHD _____
 Entered quarter total in database *years / quarters years / quarters years / quarters*

(rev. 5.17.18 J:\Academic\Forms, letters, check sheets\Forms and Petitions)

DOWNLOAD TIME-TO-DEGREE EXTENSION FOR PARENTING DEMANDS FORM

UC SANTA BARBARA

Academic Services

Graduate Divison