

# BENEFITS FORMS



## ***Adoption***

[Request for Adoption Expense Reimbursement](#)

## ***Advanced Directives***

[Directive to Physicians and Family or Surrogate Form](#)

[Spanish – Directive to Physicians and Family or Surrogate Form](#)

[Medical Power of Attorney Form](#)

[Spanish – Medical Power of Attorney Form](#)

## ***Dental***

[DHMO Enrollment Form](#)

[Dental Expense Claim Form](#)

## ***Disability, FML, and Leave of Absence***

[Forms and Information Packet for FML to Care for a Family Member](#)

[Forms and Information Packet for FML for Employee's Serious Health Condition](#)

[Forms and Information Packet for Leave of Absence - Military](#)

[Forms and Information Packet for Leave of Absence – Personal](#)

[Forms and Information Packet for Short Term Disability and FML](#)

## ***Education***

College Scholarships For Employees' Children Application Form - Coming March 2019

## ***Employees Helping Employees Program***

[Financial Gift Donation Form](#)

[Financial Grant Application](#)

[Leave Share Application](#)

[PTO Donation Form](#)

## ***Flexible Spending Accounts***

[Dependent Flexible Spending Account - Claim Reimbursement Form](#)

[Healthcare Flexible Spending Account - Claim Reimbursement Form](#)

## ***Management Forms***

[PTO Hours Adjustment Form](#)

## ***Medical***

[Medical Claim Form](#)



# BENEFITS FORMS



## ***Paid Time Off (PTO)***

[Paid Time Off Request Form](#)

## ***Prescription Drug Program***

[CVS Caremark Reimbursement Form](#)

[CVS Mail Order Form](#)

[Spanish – CVS Mail Order Form](#)

## ***Retirement***

[Continuous Service Date Appeal Form](#)

[Fidelity Transfer/Rollover Form](#)

## ***Vision***

[Vision Out of Network Claim Form](#)

