



University of South Alabama
Employee's Request for Lactation Schedule and Location

Breastfeeding employees must complete this form and forward it to Human Resources by email at ybetler@southalabama.edu or by fax at 251-460-7483.

Employee Name: _____ J# _____ Phone Number: _____

Employee Title: _____ Work Location: _____

Supervisor's Name: _____ Supervisor's Phone number: _____

Schedule Request: (Please be specific to the frequency, times and duration needed for expressing milk)
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Employee's Signature

Date

For HR use only

Schedule:

- As requested
- As modified below

Schedule Modification:

Location:

Processed by (HR)

Title

Date