

Congratulations – You’re Going To Have a Baby!

This AFA United Master Executive Council (MEC) Maternity Reference Packet was developed in an effort to simplify the process of gathering all of the information regarding Maternity Leaves as well as offer pertinent information about Personal Leaves associated with Maternity Leaves. The information included was gathered from United’s Leave of Absence (LOA) packet dated December 2008 and also includes general AFA information as well as specific information for California based Flight Attendants. For those based in London and Frankfurt, your benefits are covered in your respective Maternity Packets which are located on our website at www.unitedafa.org and are available in your domiciles. Please ensure that when accessing the AFA Maternity Reference Packet, you check to ensure you have the most updated information from United. Should you need additional assistance, contact your Local Council.

Maternity Leave of Absence

Qualifications and Conditions for Leave of Absence

As soon as you become aware of your pregnancy contact the FASC. You will be unable to fly and placed on DNF status until your physician completes the Medical Certificate for Pregnant Flight Attendant (found in **Appendix A**) and faxes it to the FASC at 847-364-2445. If unable to fly or you elect not to fly you may continue utilizing your sick bank or be placed on leave of absence.

Please note: LHR and FRA based Flight Attendants are required to obtain Maternity packets and information in their respective domiciles.

Post Notification/Pre-Delivery

With your doctor’s certification, you may fly up to and including your 31st week of pregnancy. However, a pregnant Flight Attendant must provide an updated written medical certification of her ability to continue safely flying in advance of her 28th and 30th weeks of pregnancy. The required update forms (found in Appendix B) must be faxed to the FASC at 1-847-364-2445 prior to the first scheduled ID of your 28th and 30th week of pregnancy. Failure to do so will result in removal from service until the form is received.

1. If your doctor certifies that you should not fly for a specific period of time but may be able to fly at a later date, you can elect to be placed on an illness leave of absence and/or draw from your sick leave bank and then return to active status at a later date**. You must notify the FASC via FLT-Line option 4, 4 of your election when you submit the certification form.

**FML/FMLA will run concurrently with Maternity Leave of any duration when taken prior to the 31st week of pregnancy through ninety (90) days after the actual delivery date.

2. All appearance regulations must be followed during your pregnancy. You may order a loaner maternity uniform. Please allow four (4) weeks for delivery. If needed, you will be required to purchase a winter coat. The coat must be similar in style and color to the current Flight Attendant regulation coat and must be Company approved.

Availability of Reasonable Accommodation Process (RAP)

If you are domiciled in CA, HI, or WA (or any other jurisdiction that recognizes pregnancy as a disability), you are eligible to participate in RAP during your pregnancy. You will be eligible if: (1) your doctor certifies that you either cannot fly or cannot meet the essential functions of the Flight Attendant position for the remainder of your pregnancy; OR (2) you have reached the 31st week of your pregnancy. Your situation will be considered on an individual basis. If you are domiciled in any of the above-listed states (or one that recognizes pregnancy as a disability) and become interested in participating in RAP during your pregnancy, please contact the FASC.

Maternity Sick Leave

If you have sick leave time left in your bank when you begin your Maternity Leave, you will be placed on maternity sick leave. You can remain on maternity sick leave until you exhaust your sick leave bank, until the 42nd day following the birth of your child, OR until you elect to be placed on a Maternity LOA. Because you will remain an active employee while on this status, your benefits are not impacted.

During this period, you may choose between the following Flight Time Credit options by selecting the corresponding "long Term Leave Option" listed on the bid screen as follows:

Flight Time Credit	Long Term Leave Option
65 hour minimum	MIN
97 hour maximum	MAX
100 hour maximum	MAX 2
Value of your Line Award (Paper Bid)	BID

Should you choose to paper bid, use the bid screen (accessed via LOFBID in Unimatic) to select from the available lines at your location. When you display your bid card while you are on a Leave of Absence or Extended Illness Status, you should see an asterisk (*) in front of your name. This asterisk indicates that you will not be awarded an actual Line of Flying. Rather, you are establishing the basis for your pay in the month for which you are bidding. If the asterisk does not appear, you will be awarded a schedule as you normally would.

When bidding for a paper award, fill out the bid screen as you normally would. During the award of schedules, you will be paid based on what you have bid and what your seniority would normally hold. Should your bid be insufficient, you will be assigned based on the lowest numbered line available at your seniority and will be paid the value (projection) of that line. If you hold a premium position, you will be paid the premium pay that applies for the line which you are assigned.

If you are ONSL for the entire month, you may contact Flight Time Records at the Flight Attendant Service Center to change your pay option. However, if you wish to increase time above the value of your awarded schedule, premium pay will be for the value of the line to which you are assigned.

Maternity Leave of Absence

Once the Medical Certificate for Pregnant Flight Attendant is submitted and processed a Maternity Leave of Absence is available to a Flight Attendant: (1) whose sick bank is exhausted, or (2) chooses to be placed on Maternity Leave of Absence, and /or (3) through the 90th day following the birth of the child. Benefits while on this status are the same as the benefits beginning on page 16 in the Non-Occupational Medical Leave of Absence section of this packet. *(These benefits have been reprinted on page 4 of this AFA Maternity Reference Packet)* A Flight Attendant may be transitioned to a Non-

Occupational Medical Leave of Absence if she is medically unable to return to work upon the expiration of the 90 day period following the birth.

Following Delivery

Advise the FASC of delivery or termination of pregnancy as soon as possible. A Family Status Change must be completed within thirty (30) days of date of birth to add your new dependent(s) to your personnel records. You can contact the United Benefits Service Center (UBSC at 1-800-825-0188 or complete the change on-line at www.ualbenefits.com. Please be prepared to present a Birth Certificate or Social Security Card (provided you have a Social Security Card for your newborn) if requested by the UBSC.

A Flight Attendant's status options depend on the amount of time that has passed since the birth of the child.

1 – 42 days following birth

Without any certification that you are medically ill, you may remain on Maternity Sick leave and draw from your sick leave bank. If no sick leave bank is available, you will be placed on Maternity Leave of Absence status 17 days following the day you exhaust your sick leave bank. If you exhausted your sick leave bank in advance of the birth, you will be on Maternity Leave for this entire period. Additionally, Family Medical Leave will run concurrently with Maternity Leave effective the date of delivery if you have the required qualifying hours for FML/FMLA and if you have not exceeded your allotted use of FML/FMLA.

43 – 90 days following birth

You may remain or be placed on Maternity Leave/Non-Occupational Medical Leave of Absence status. No sick leave payments will be made during this period unless you demonstrate that you are medically ill and unable to work. Additionally, Family Medical Leave will run concurrently with Maternity Leave effective the date of delivery if you have the required qualifying hours for FML/FMLA and if you have not exceeded your allotted use of FML/FMLA.

91 – 180 days following birth

a) If you are unable to return to work due to the health of your newborn, you will need to request a Personal Leave of Absence. Please refer to page 19 of the Personal Leave of Absence section for request information and applicable benefits. (*The Personal LOA information is reprinted on page 5 of this AFA Reference Packet*) If you are approved for a Personal Leave, you will be contacted by the Flight Attendant Service Center with a recalculated return to work date.

b) If you are medically unable to return to work during this period, you will either continue to receive your available sick leave pay or continue your Non-Occupational Medical Leave of Absence status. Medical documentation (Absence Certificate) will be required from your treating physician in either case. Non-Occupational Leaves of Absence must be authorized by United Medical (OPCMD).

181 days and beyond

a) If you are unable to return to work due to the health of your newborn, the Company will evaluate your request for additional time off as a Personal Leave request. See Personal Leave section for further details.

b) If you are medically unable to return to work during this period, you may continue to draw from any available sick leave pay or continue your Non-Occupational Medical Leave of Absence status with proper medical documentation (Absence Certificate).

Length of Leave of Absence

Maternity Leave of Absence is available through the ninetieth (90th) day following the birth of the child. You may remain on a Non-Occupational Medical Leave of Absence if you are medically unable to return upon expiration of the ninety (90) day period following the birth. At that time, you will be expected to comply with the conditions of a Non-Occupational Medical Leave of Absence.

FASC Communication during Leave of Absence

Upon receipt of the Medical Certification for Pregnant Flight Attendant Form, you will receive a letter with written instructions from the FASC advising you of the specifics of your Maternity Leave. This will be the only form of written communication sent to you by the FASC for the duration of your leave.

Transfer on File

If a transfer is awarded during your Leave and you are unable to clear OPCMD and report to your new domicile, your transfer will be rescinded without penalty. Transfer requests are not subject to cancellation and will remain on file until the transfer request is either accepted or cancelled by you. Transfers processed after a return to active service from any Leave of Absence will be processed in accordance with the language in Section 22.A.2 of the Collective Bargaining Agreement.

Employee Pleasure Travel

Effective the date of leave, you will be eligible for non-revenue space available (NRSA) pleasure travel on United and United Express for the duration of the leave. Travel privileges include your travel eligibles and companions. Performance Incentive Program segments may be used during your medical leave of absence or by the expiration date, whichever is sooner. Your pleasure travel privileges also include approved non-revenue positive space (NRPS) emergency travel and Discount 20. Interline and BP-10 travel is not available to employees on a Leave of Absence including all reciprocal agreements.

Insurance

Your Medical, Dental, and/or Vision Insurance will continue for you and your dependents (if applicable) throughout your Non-Occupational Medical LOA, provided you pay your employee contributions. You will be responsible to pay the monthly amount that is normally deducted from your paycheck. You will receive a notification letter from the United Benefits Service Center (UBSC) with payment details. (note: If you fail to pay for your coverage by the invoice due date during your leave, your coverage will be terminated and cannot be reinstated until one of the following criteria is met: (1) you return to active states or (2) the January 1 following the Annual Enrollment period).

If you opt not to continue coverage while on your Non-Occupational Leave, your insurance benefits prior to your leave will be reinstated when you return to active status. Furthermore, if you return to work during or after the Annual Enrollment Period, you will have thirty (30) days from the date of your Personal Enrollment sheet in which to make changes to your benefits.

Should you have a "qualifying event" such as a divorce, your spouse losing medical coverage from his employer while on leave, you will have thirty (30) days from the date or the event in which to enroll for eligible coverage. Questions can be directed to the UBSC at 1-888-825-0188.

Company paid Basic Life Insurance and Accidental Death and Dismemberment Insurance continues for the entire period of the Non-Occupational Leave.

Obtain Medical Clearance

Following a Maternity LOA, you must fax an Absence Certificate completed by your physician clearing you to return to work to OPCMD before you are allowed to attend training and/or are returned to active status. If you choose to visit a Concentra Medical Center or affiliate, where applicable, in lieu of submitting medical documentation, you will need to call United Medical (OPCMD) at (847) 700-4461 or email OPCMD at OPCMD@united.com to request an Authorization for Examination Form. OPCMD will help in determining which authorized center is nearest your domicile or primary UG address. Once the location is determined, you will need to take all applicable medical documentation from your treating physician with you to this visit. Once clearance is received at the FASC you will be contacted regarding TSA mandates and/or training requirements.

If you are unable to return to work after your pregnancy due to your own medical condition, you will be required to provide OPCMD with a completed Absence Certificate from your treating physician giving diagnosis of your illness or injury, treatment received and the date of your release to return to work. In certain instances, OPCMD may disagree with your physician's assessment of your fitness to work. In this event, you may appeal the Company's determination under the Medical Arbitration provisions of Section 20.D of the Agreement.

Personal Leave Of Absence

Qualifications and Conditions for Leave of Absence

Complete and submit the Personal Leave request form found on SkyNet/Onboard Service Home/Flight Attendant Service Center/LOA Homepage. In order to provide the two (2) weeks notice as required in Section 23.A. of the Collective Bargaining Agreement (CBA), you must send documentation to support your request to the FASC at 847-364-2445 no later than fifteen (15) business days prior to your requested leave commencement date. Your request along with your documentation will be reviewed. Based on the operational needs of the Company, the request will either be approved or denied. Once approved, the Company may terminate or shorten the leave, consistent with the provision 23.A. of the CBA.

Length of Leave of Absence

A Personal Leave should be requested by the Flight Attendant schedule month(s) and shall be granted for a period not in excess of one hundred eighty (180) days. Such period may be extended for additional periods not to exceed ninety (90) days each.

FASC Communication during Leave of Absence

You will receive written notification from the FASC regarding the approval/denial of your request. This will be the only form of written communication sent to you by the FASC for the duration of your Personal Leave.

Transfer on File

If awarded a domicile transfer, you will be required to decline the transfer or terminate your leave and return to active status to accept the transfer. (Note: Return to active status includes: clearing Company Medical (OPCMD), attending any required training and completing a contractual work assignment in your current domicile.) Should you decline your transfer, it will be removed from your file with no penalty. Any non response to your transfer award will inhibit your ability to request a transfer for three (3) months. Upon return from your Personal Leave, you may resubmit a transfer bid to the domicile of your choice.

ANP in Conjunction with a Personal Leave of Absence

Any ANP, whether taken in a block of time or trip-by-trip, which adjoins a Personal Leave of Absence is treated as an extension to the Personal Leave.

If a 30-day ANP precedes a Personal Leave, the effective date of the leave is retroactive to the start of the ANP.

Seniority Accrual

Per the current Collective Bargaining Agreement, your seniority will accrue for the first 180 days of your Personal LOA. The 180 days will be counted in consecutive days. If there is a break in your Personal Leave, the 180 day countdown would begin again.

Employee Pleasure Travel

Effective the date of leave, you will be eligible for ninety (90) days non-revenue space available (NRSA) pleasure travel on United and United Express. Travel must be completed within the ninety (90) day period. Travel privileges include your travel eligibles and companions. Performance Incentive Program segments may be used during the ninety (90) days or by the expiration date, whichever is sooner. Your pleasure travel privileges also include non-revenue positive space (NRPS) emergency travel and Discount 20. Interline and BP-10 travel is not available to employees on a Leave of Absence including all reciprocal agreements.

Insurance

You will have the opportunity to continue your Medical, Dental and/or Vision coverage (insurance benefits) for up to eighteen (18) months (known as COBRA coverage) by paying the full cost of your coverage plus a 2% administrative fee. You will receive detailed information from the United Benefits Service Center (UBSC), within forty-five (45) days of the start of your Personal Leave.

If you do not elect COBRA while on Personal Leave, your insurance benefits will be automatically cancelled on the last day of the month in which your leave begins. However, if your leave begins on the first day of the month, your insurance benefits will be cancelled effective the last day of the previous month. You will receive an enrollment packet upon your return to work. You will have thirty (30) days from the date on your Personal Enrollment sheet to enroll for benefits.

If you elected at least one COBRA benefit while on your leave, you must contact UBSC within thirty (30) days of your return to work to reinstate benefits waived while on leave.

Regardless of your choice to elect COBRA or discontinue insurance coverage during your leave, should your return to work occur during or after the Annual Enrollment Period, you will receive an enrollment packet upon your return to work from the UBSC. You will have thirty (30) days from the date on your personal enrollment sheet in which to make changes to your benefits.

Should you have a "qualifying event" such as a divorce, a spouse losing medical coverage from his or her employer, having a baby, etc. you will have thirty (30) days from the date of the event in which to enroll for eligible coverage. Questions can be directed to the UBSC at 1-888-825-0188.

Company paid Basic Life Insurance and Accidental Death and Dismemberment Insurance continues for a maximum of 180 days for Personal Leave provided that you pay the cost of the premium.

Obtain Medical Clearance

Following a Personal Leave of Absence over sixty (60) days, you must be cleared by OPCMD before returning to active status. It is your responsibility to complete the enclosed Statement of Health (found in Appendix G) and fax to OPCMD at 847-700-2600 a minimum of fifteen (15) days prior to your scheduled return to work date. OPCMD will review your form and will either clear you to return to work or will contact you for additional information. You may contact the FASC two business days after submission to verify receipt and work status.

If you are unable to return from your Personal Leave due to your own medical condition, you will remain on Personal Leave status with all benefits remaining as stated in this section (insurance, pass travel) with the exception of seniority accrual. Your seniority will accrue as outlined in Section 23.C. of the Agreement under Medical Leave for a period not to exceed three (3) years. The three (3) year period will commence on the day first day you are medically unable to return to work following your Personal Leave.

GENERAL AFA INFORMATION

Unemployment

Company policy does not permit you to perform your job as a Flight Attendant after the 31st week of pregnancy. Contractually, there are no short term job opportunities, therefore, you are unemployed. You should go to your unemployment office and file a claim as soon as possible after the 31st week. Do not state that you are unable to work, only that you cannot fly. Unemployment will not pay for the first seven days of the claim, and your claim does not begin until after the paperwork has been filed. Laws differ from state to state so you should always apply, but you may not be able to collect. If you live in a state other than where you are based, you will have to contact your local unemployment office to get information on how to file an interstate claim for your domicile state. Keep in mind that your home state does not have control over your claim. They are just providing the paperwork to initiate the claim as a courtesy to your home state and should not be putting stipulations on your claim by requiring you to attend job trainings etc. The decision to pay unemployment does not rest with your home state.

When completing the forms after the 31st week, remember to state that you are able to work if you are physically able to see employment. In effect you have been grounded and there are no short term opportunities. Although you are represented by a Union, AFA is not able to provide you work so the response to questions of this type would be no. Be flexible in indicating the hours you will work and the salary you will accept. If you are unrealistic in responding to these types of questions, your claim may be denied. Also keep in mind that the amount of unemployment you are eligible for is based on what you have earned in prior months. You will have to check with your state unemployment office for specific regulations.

Use of sick leave and FML

You do have the ability to work if medically able for the first 31 weeks. If you are sick and unable to work during this time period, you have the right to call in sick. Be sure to designate this illness as FML as points are not assessed for approved FML.

Once you notify management that you are pregnant and have not provided any medical documentation, you will be removed from your assignment and certified as DNF. Once your pregnancy is medically verified, the DNF will be retroactively coded as MSL (Maternity Sick Leave) and no points will be assessed. If your doctor determines that you can fly intermittently, your use of sick leave (ONSL) for maternity related illnesses will be assessed points. If you qualify for Family Medical Leave (FML), no points will be assessed. Your last sick leave that transitions into your Maternity Leave will not be assessed points.

Each time you call on and off sick leave, will be treated as an individual occurrence and points will be assessed for each occurrence even if there is no flying in between. Example: you call in sick for your one day ID on Monday and you have three days off so you call off sick leave. You are still sick on Thursday and need to call back on sick leave for your ID on Friday. This will be two occurrences and points will be assessed for each sick leave call.

Information regarding our work environment can be found on the AFA International website at www.afanet.org. Click on the Air Safety Department home page. Once there, click on health issues to find information regarding cosmic radiation, air quality, communicable diseases and pesticides.

Union Dues

If you are collecting sick leave, dues will be deducted from your paycheck. While on a LOA, you are obligated for the first three months. If you pay monthly, you will receive a bill from the International Office. Once you receive your bill, you can make payments on line via the International website. If you are an annual payer, contact the Membership Department at the International office at 800 424 2401 ext 707. Depending on when your leave takes place, there is a possibility that you may be entitled to a refund.

California Specific Information

If you pay California Short Term Disability (CA SDI), you are eligible to apply for this benefit. It is applicable in your 27th week of pregnancy if your physician certifies that you are no longer able to fly. If you elect not to fly, you are eligible to collect CA SDI in your 31st week. You will need to provide completed documentation signed by your physician and your supervisor. Contact the California EDD Department at 800-300-5616 for more information or visit the website at www.edd.cahwnet.gov. CASDI will continue until six (6) weeks postpartum if you have a normal delivery or eight (8) weeks postpartum if you have a cesarean delivery. You may be able to collect both sick leave and CA SDI during this time period but you may not keep both. Section 19.A.10 states – “A Flight Attendant will remit to the Company any state disability benefits she/he receives while on sick leave. Such benefits will not be credited to the Flight Attendant’s sick leave bank.” You will need to sign the check over to United and it will not buy back sick leave hours. Contact the FASC to determine to whom to send the check.

Uniforms

There is a maternity uniform. The uniform is available through Brookhurst and the appropriate points will be deducted or if you have no points you can purchase the item using a credit card. Or check with

your supervisor or the coordinator to see if there are loaner uniforms available. Another resource is to check with Flying Partners who may be able to inform you of who might have one to loan you.



Appendix A



UNITED

Medical Certification for Pregnant Flight Attendant

Dear Doctor:

With appropriate medical certification, a United Airlines Flight Attendant may continue to work as a Flight Attendant through the 31st week of pregnancy. We require an initial medical certification upon notification of pregnancy and follow-up certifications at the 28th and 30th weeks.

The certification asks you to attest to the Flight Attendant's ability to safely perform the duties of the Flight Attendant position. To assist you in this evaluation, a copy of the current job description for the Flight Attendant position is attached.

Initial Certification of Pregnancy

This is to certify that _____ is under my care for pregnancy. The expected date of delivery is ___/___/___ . Based on my examination of her, and my review of the job description for the Flight Attendant position:

She is **able**

She is **NOT** able

to safely perform the essential functions of the Flight Attendant position.

File Number: _____

Signature of Health Care Provider/Title	Date
This signature certifies that this form was completed by the Health Care Provider	
Printed or Typed Name of Health Care Provider	Type of Practice
Address	Telephone Number
Health Care Provider's Office Hours:	
Appointment Hours:	
(To be completed by Health Care Provider)	

Please fax to: United Airlines at (847) 364-2445



Appendix B

28th Week Certification of Pregnancy

This is to certify that _____ is under my care for pregnancy.
The expected date of delivery is __/__/__. Based on my examination of her, and my review of the job description for the Flight Attendant position:

She is able

She is NOT able

to safely perform the essential functions of the Flight Attendant position.

File Number: _____

Signature of Health Care Provider/Title This signature certifies that this form was completed by the Health Care Provider	Date
Printed or Typed Name of Health Care Provider	Type of Practice
Address	Telephone Number

Health Care Provider's Office Hours:

Appointment Hours:

(To be completed by Health Care Provider)

Note: This form must be faxed to the FASC at 847-364-2445.

30th Week Certification of Pregnancy

This is to certify that _____ is under my care for pregnancy.
The expected date of delivery is __/__/__. Based on my examination of her, and my review of the job description for the Flight Attendant position:

She is **able**

She is **NOT** able

to safely perform the essential functions of the Flight Attendant position.

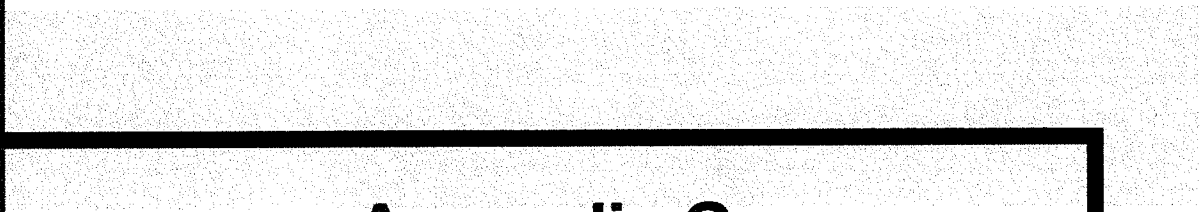
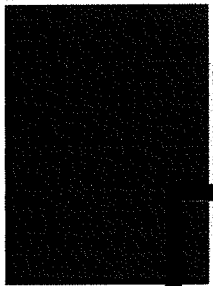
File Number: _____

Signature of Health Care Provider/Title	Date
This signature certifies that this form was completed by the Health Care Provider	
Printed or Typed Name of Health Care Provider	Type of Practice
Address	Telephone Number

Health Care Provider's Office Hours: Appointment Hours: (To be completed by Health Care Provider)

Note: This form must be faxed to the FASC at 847-364-2445.

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Appendix G



STATEMENT OF HEALTH

Name (First, Middle, Last): _____
(Print)

File Number: _____ LOA Return Date: M ___ D ___ Y ___

Domicile: ___ ___ SW Phone contact: _____

I am medically able to return to work with no restriction on: M ___ D ___ Y ___

Agree _____	Disagree _____
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If you **agree** that you are medically able to return to work without restrictions check the appropriate box, sign and fax this form to WHQUN at **847-364-2445**.

If you **disagree** that you are medically able to return to work (with or without restrictions) check the appropriate box, sign and fax this form along with a completed Absence Certificate from your treating physician to OPCMD at 847-700-2600 no later than your scheduled return to work date.

Signature: _____ Date: _____

Retain a copy for your personal records.

If you believe you need a reasonable accommodation (RAP) for a disability which would not allow you to perform the essential functions of the flight attendant job responsibilities, please contact the FASC at 1-800-FLT-LINE and ask to speak with your assigned supervisor to participate in RAP.



Appendix H

CRIMINAL HISTORY RECORD CHECK

CONTINUED DISCLOSURE STATEMENT AND CONSENT

Completion of this form is required for all Flight Attendants returning to A1 active status after any leave of absence/furlough in excess of 31 consecutive days (excluding military LOA). The returning Flight Attendant is solely responsible to prepare and fax the signed copy to 1-847-364-2445. Failure to comply will result in a Line of Flying diagnostic code preventing future flight assignments (unpaid) and disciplinary action, up to and including discharge.

In accordance with Code of Federal Regulations, Title 49, Part 1544.229, employees of airlines, vendors or/and contractors that require unescorted Security Identification Display Area (SIDA) access must obtain authorization for such clearance from the Transportation Security Administration. You previously obtained this clearance by completing a Criminal History Record Check (CHRC) through submission of your fingerprints and supporting documentation. Individuals who have been convicted (see below for definitions of conviction) or have been found not guilty by reason of insanity to any of the following criminal offenses are not granted SIDA badges for unescorted airport access:

- | | |
|--|---|
| <ul style="list-style-type: none">(1) Forgery of certificates, false marking of aircraft, and other aircraft registration violation; 49 U.S.C. 46306.(2) Interference with air navigation; 49 U.S.C. 46308.(3) Improper transportation of a hazardous material; 49 U.S.C. 46312.(4) Aircraft piracy; 49 U.S.C. 46502.(5) Interference with flight crew members or Flight Attendants; 49 U.S.C. 46504.(6) Commission of certain crimes aboard aircraft in flight; 49 U.S.C. 46506.(7) Carrying a weapon or explosive aboard aircraft; 49 U.S.C. 46505.(8) Conveying false information and threats; 49 U.S.C. 46507.(9) Aircraft piracy outside the special aircraft jurisdiction of the United States; 49 U.S.C. 46502(b).(10) Lighting violations involving transporting controlled substances; 49 U.S.C. 46315.(11) Unlawful entry into an aircraft or airport area that serves air carriers or foreign air carriers contrary to established security requirements; 49 U.S.C. 46314.(12) Destruction of an aircraft or aircraft facility; 18 U.S.C. 32.(13) Murder.(14) Assault with intent to murder.(15) Espionage.(16) Sedition.(17) Kidnapping or hostage taking.(18) Treason. | <ul style="list-style-type: none">(19) Rape or aggravated sexual abuse.(20) Unlawful possession, use, sale, distribution, or manufacture of an explosive or weapon.(21) Extortion.(22) Armed or felony unarmed robbery.(23) Distribution of, or intent to distribute, a controlled substance.(24) Felony arson.(25) Felony involving a threat.(26) Felony involving --<ul style="list-style-type: none">(i) Willful destruction of property;(ii) Importation or manufacture of a controlled substance;(iii) Burglary;(iv) Theft;(v) Dishonesty, fraud, or misrepresentation;(vi) Possession or distribution of stolen property;(vii) Aggravated assault;(viii) Bribery; or(ix) Illegal possession of a controlled substance punishable by a maximum term of imprisonment of more than 1 year.(27) Violence at international airports; 18 U.S.C. 37.(28) Conspiracy or attempt to commit any of the criminal acts listed in this paragraph (d). |
|--|---|

By signing this form below I acknowledge that, although I previously cleared the Criminal History Record Check (CHRC) by submitting my fingerprints and supporting documentation, I am continually obligated to disclose to United Airlines, within 24 hours, if I am convicted (see below for definition of conviction) or am found guilty by reason of insanity the disqualifying criminal offenses listed above from 12/6/91 up through the date of this application. You have a conviction if you pled guilty, pled nolo contendere, are currently serving probation or have served probation, or are currently participating or have participated in either a pretrial diversion or deferred adjudication process for any of the disqualifying criminal offenses.

I hereby also acknowledge I have read and understand this application. My signature below authorizes any further CHRC activities (background check, supply documentation or fingerprint resubmission) required to obtain and/or retain SIDA access authority.

If I am an employee domiciled at an international location, I acknowledge that I previously signed a Fingerprint Authorization that permitted United Airlines to take my fingerprints and undergo a CHRC. I further acknowledge that it is Company policy to keep information about employees confidential within the limits imposed by law, the results of the CHRC are confidential and access is limited to WHQSE and Company representatives who are required to know. I understand that my fingerprints if re-submitted, will be transmitted and processed in the United States.

The information I have provided on this application is true, complete and correct to the best of my knowledge and belief and is provided in good faith. I understand that a knowing and willful false statement on this application can be punished by fine or imprisonment (section 1001 of Title 18 United States Code).

Print your name: _____ File No. _____ Domicile: _____ SW
Signature: _____ Scheduled date of return ____/____/____ Today's date ____/____/____
(mm / dd / yy) (mm / dd / yy)

Completion directions:

Review and complete all form sections no later than 14 days prior to scheduled end of leave of absence
Fax to WHQUN –Flight Attendant Service Center at 1-847-364-2445.



Appendix I

Description of Flight Attendant Job Duties

Overall Duties and Work Environment

Provides high quality customer service to passengers based on market specification and individual needs. This includes, but is not limited to, enroute cabin service and/or ground cabin service to delayed or canceled passengers.

Reads, interprets, demonstrates and provides safety briefings to passengers. Communicates and ensures compliance with company and government safety and security rules and procedures. Required to manage crew and passengers in any potential onboard event, including medical emergencies, assessment of security threats and a variety of difficult situations. Oversees cabin to ensure cockpit access is prevented by unauthorized personnel. Provides leadership, direction, and assistance to passengers and other crew members in stressful, emergency or evacuation situations.

Works in an environment subject to varying climatic conditions and air pressures, turbulence-induced variable positive and negative G loads, changing work locales, variable hours and shifts and working conditions, moderate noise levels, dim lighting, confining spaces and frequent contact with others. May be exposed to radiation levels of three to six millisieverts (mSB) per year at altitude, dry air ranging from 4% to 15% humidity, and ambient altitudes ranging from 4,000 to 8,500 feet. The frequent air pressure changes could predispose certain employees to ear and/or sinus barotraumas.

Specific Duties and Abilities

Proactively assists passengers with stowage (i.e., floor to above shoulder level) of carry-on bags, garments and other belongings. Serves or sells food, beverages and various other amenities in accordance with service standards. Picks up trash, keeps cabin and lavatories tidy. Provides assistance, which could include cardiopulmonary resuscitation, to ill or incapacitated passengers.

Operates mechanical and safety equipment such as oxygen systems, aircraft doors, evacuation slides, fire extinguishers, life rafts, galley equipment, communication and audio/visual equipment and lighting systems. Handles cash and credit transactions for liquor, audio equipment and other sales. Uses computers, including navigation within Windows environments and data entry and retrieval of information using company operated systems. Reads, comprehends, updates and uses technical or specialized information.

Interacts in a professional and friendly manner with clients, coworkers and customers of diverse backgrounds. Works with other crewmembers on a team to ensure all services meet company standards. Takes responsibility and is accountable for commitments and assignments.

Presents a professional image, including a neat, well-groomed appearance as described in United Company Regulations 30-5.

Must be able to speak in a clear, concise, and organized manner, loudly enough to be heard in an emergency. Ability to speak and understand English fluently. Proficiency in a second language highly desirable. Ability to hear all types and ranges of sound. Must meet hearing

and vision requirements as established by the Federal Aviation Administration and the airline.

Ability to use time efficiently and productively. Ability to demonstrate assertiveness and influence, when appropriate. Ability to resolve difficult, emotionally charged or confrontational issues while maintaining composure and focusing on customer needs. Ability to make decisions with little or no supervision, or in the face of rapidly changing events, stress, emergencies or crises. Ability to demonstrate flexibility and adjust easily to new conditions, changing needs and priorities.

Must complete Initial Flight Attendant Training, including Emergency Procedures and annual recurrent emergency training. May be required to complete other training as well.

Physical Requirements

Flight Attendants are required to be able to perform a combination of physical activities in the course of their work day. The types and combination of physical activities that are required may vary from day to day, depending upon job tasks assigned. Some of those activities include the following:

Works in aircraft aisles and galleys for periods of up to fourteen (14) hours or more, performing duties which require standing, walking, climbing, stooping, crouching, squatting, kneeling, reaching, twisting and bending. Such duties may be compromised by unpredictable events such as air turbulence.

Pushes or pulls movable carts. Ergonomic studies show that the initial push/pull force (force required to put a beverage or food cart in motion, at a flat angle) is 29 pounds of force. On a 4 degree angle, the estimated required force is 45 pounds.

Frequently required to use force up to 25 lbs. to lift, push, or pull objects, such as beverage stowage bins. Occasionally required to use 25 to 55 lbs. of force to lift, push, or pull objects. At times, required to use forces greater than 55 lbs. to lift, push, or pull objects. Some of these push, pull, or lifting forces must be performed with the arms at or above shoulder level, such as in the case of closing or opening overhead bins.

Ability to perform tasks that require overall body coordination/balance. Vertical reach of at least 82 inches (2.08 meters) and maximum height of 76 inches.

Education

High school graduate or GED.

Additional Qualifications

Qualifications: Must be able to complete company physical assessing capability to meet Flight Attendant essential functions with or without a reasonable accommodation, drug tests, background checks, the required initial and emergency procedures for Flight Attendants and other pre-employment checks required to obtain SIDA access. Must possess valid passport prior to attending training with thirty (30) months validity remaining prior to expiration.



Appendix J

BENEFITS WHILE ON A LEAVE OF ABSENCE – Reference Chart

	Sick Leave Accrual	Travel Privileges		Vacation Accrual	Seniority Accrual	401(k)	Insurance			Company Paid Life and Accidental Death & Dismemberment
		UA UAX	1 - Other 2 - Companion				Medical	Dental	Vision	
Non-Occupational Medical LOA	No	Yes*	1 - No 2 - Yes	No**	3 Years	No	Yes+	Yes+	Yes	Yes
Maternity LOA	No	Yes*	1 - No 2 - Yes	No**	3 Years	No	Yes+	Yes+	Yes	Yes
Personal LOA	No	90 Days ***	1 - No 2 - Yes	No	180 Consecutive Days ****	No	Max of 18 months if you pay full cost	Max of 18 Months if you pay full cost	Max of 18 Months	Max of 180 days if you pay premium
Special LOA	No	90 Days ***	1 - No 2 - Yes	No	180 Days in a rolling calendar month ****	No	Max of 18 months if you pay full cost	Max of 18 Months if you pay full cost	Max of 18 Months	Max of 180 days if you pay premium
Educational LOA	No	90 Days ***	1 - No 2 - Yes	No	270 Days	No	Max of 18 months if you pay full cost	Max of 18 Months if you pay full cost	Max of 18 Months	Max of 180 days if you pay premium
Military LOA	No	Yes*	1 - No 2 - Yes	No	See FA Agreement Section 23.F.	No	First 3 months at employee cost & an additional 21 months at full cost	First 3 months at employee cost & an additional 21 months at full cost	Max of 24 Months	Max of 180 days if you pay premium

- * Travel privileges on UA and United Express only for duration of leave
- ** Vacation continues to accrue only if medical leave is due to occupational injury or illness
- *** Travel on UA and United Express must be completed within 90 days from effective date of leave
- **** Company, SW, Pay and date of employment seniority will be adjusted after 180 days
- + Medical continues if you pay the monthly employee contribution.

Note: Two consecutive 30-day ANP periods revert to a Personal Leave of Absence. Additionally, any ANP which adjoins a LOA is treated as an extension of the LOA. If a 30-day ANP precedes a Special Leave; the effective date of the leave is retroactive to the start of the ANP. This may affect seniority, employee pass travel and insurance.

The above chart summarizes how LOA status affects benefits. Although United expects to continue to offer these benefits, the Company reserves the right to modify, reduce, change or terminate all or any part of any of these benefit plans (subject to the terms of your AFA collective bargaining agreement). This summary chart is not meant to supersede any plan documents which govern these benefits. In case of conflict, the actual plan documents always control.



Appendix K

Leave of Absence Return To Work Checklist

Flight Attendants must contact the FASC at least 30 days prior to return to work date. The following actions must be completed in order to return to work as scheduled.

<u>Flight Attendant Functions</u>	<u>Date Accomplished</u>
Company Medical Clearance (Send medical clearance to OPCMD at least 30 days prior to return)	
Complete Criminal History Record Check Continued Disclosure (Form attached in this booklet; complete and fax to FASC at 847- 364-2445)	
Uniform Requirements	
Ensure Passport is current & Obtain Required Visa(s) (prior to return)	
Procure Security Identification Display Area (SIDA) Badge/Parking Badge	
Ensure FAOM is up-to-date	
Appearance Check with Domicile Supervisor (In complete uniform prior to first trip)	
Review numbers in FDUG/FDEM (for accuracy)	
Return to Work Briefing (at Domicile)	



Appendix L

Resource Reference List

- ❖ Bid packet online: <http://airline.compuserve.com/ual/default.asp>
- ❖ Company Medical (OPCMD) – 847-700-2600 (FAX)
(All Medical documentation **excluding** Family Leave paperwork and ESF forms)
- ❖ CNA – 1-800-339-9527
(Long-Term Care Insurance Plan)
- ❖ Credit Union at Self-Service Telephone – 773-462-2100 or 1-800-482-5328
- ❖ Credit Union at Telecenter – 1-800-328-1935
- ❖ FAOM Coordinator – 847-700-1160
(To order a new FAOM prior to training)
- ❖ Flight Attendant Service Center (FASC) – 1-800-FLT-LINE (1-800-358-5463) –
Option 4, 4
- ❖ Flight Attendant Service Center (FASC) – 847-364-2445 (FAX)
(Military Orders, Maternity Pregnancy Certificate and CHRC form)
- ❖ Fidelity – 1-800-245-9034 or www.401k.com
- ❖ MetLife – 1-800-Get-Met8 (1-800-438-6388)
(Group Universal Life Insurance Plan)
- ❖ Pension Benefit Guaranty Corporation (PBGC) 1-800-400-7242
(Refer to case #19962800)
- ❖ Retirement Service Center – 1-800-482-5236
- ❖ United Benefits Service Center (UBSC) – 1-888-825-0188
(Insurance, travel eligibility, COBRA, medical or dental benefits)