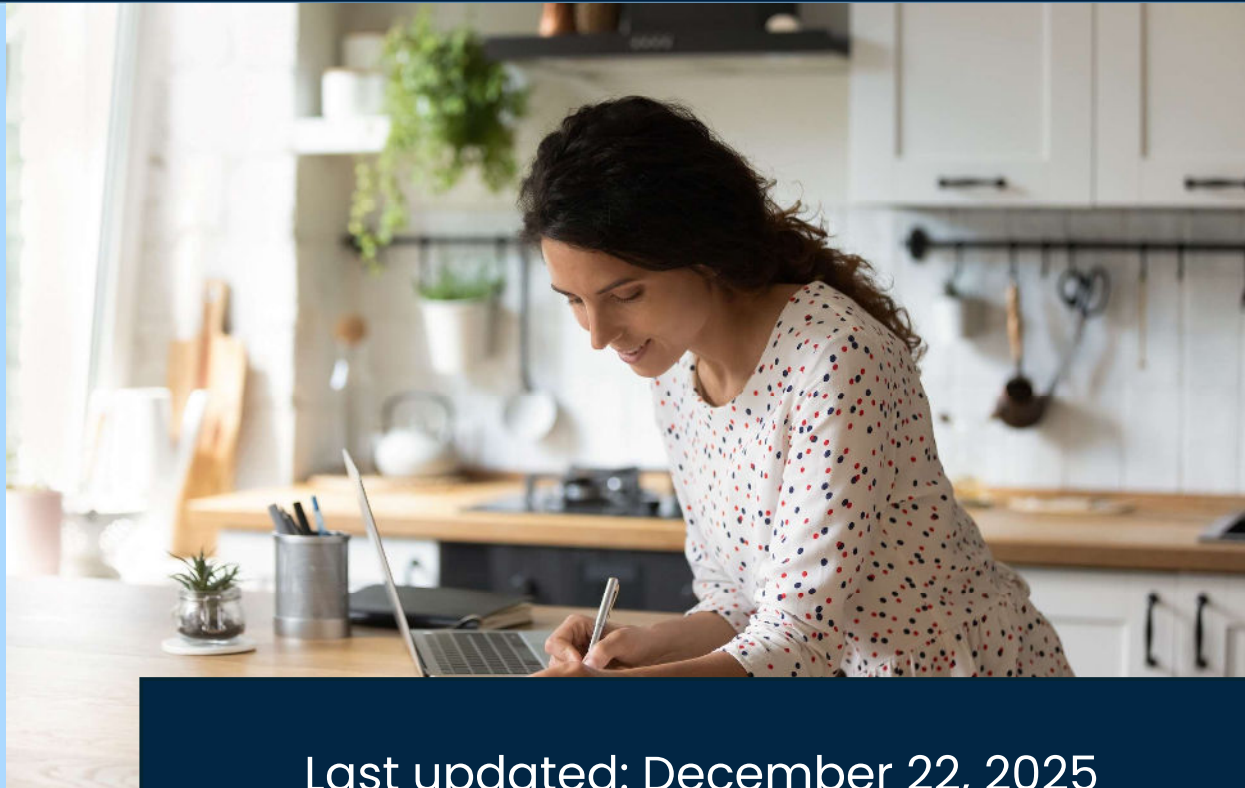


# QRG

## Quick Reference Guide (1-29 Steps)

### How to Process Return from Leave of Absence

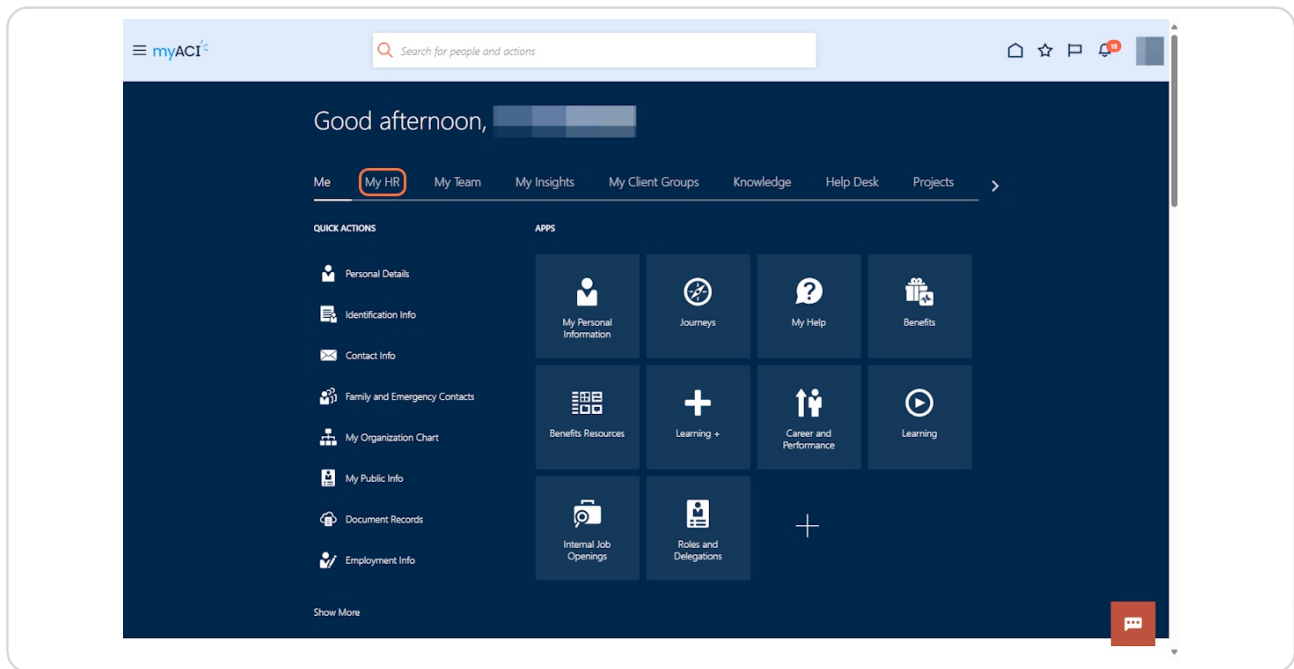
This QRG is for managers, HR representatives and associates on how to submit a Return from Leave of absence (LOA) request.



Last updated: December 22, 2025

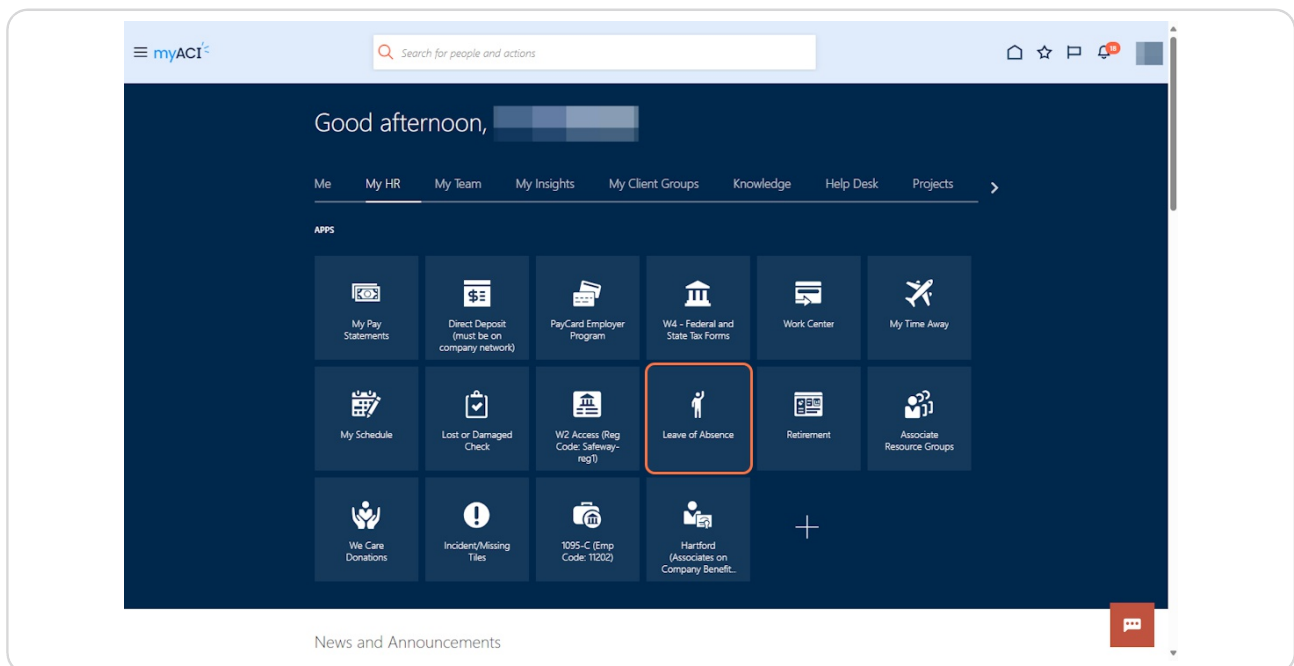
## STEP 1

Sign in to myACI then click on My HR.



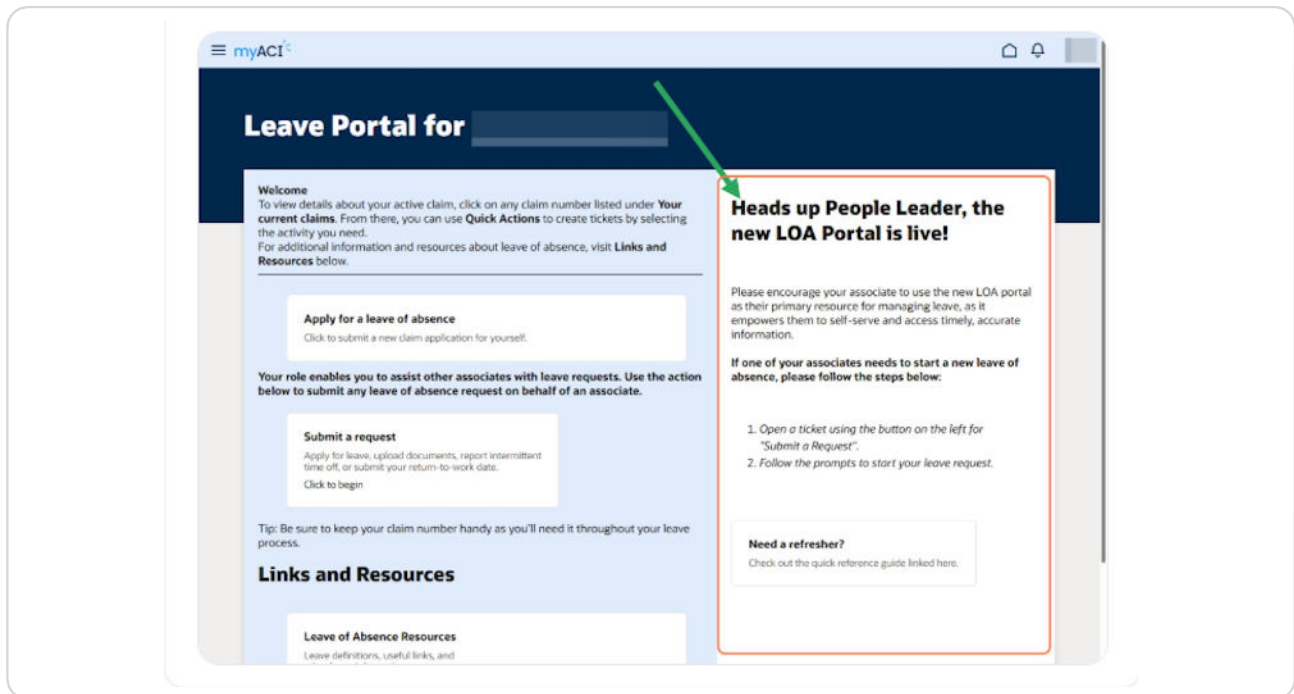
## STEP 2

**Click on Leave of Absence**



### STEP 3

If you are an HR/People Leader, this section of the screen will appear for you. Associates will not see the "Heads up People Leader, the new LOA portal is live!" section on their view.



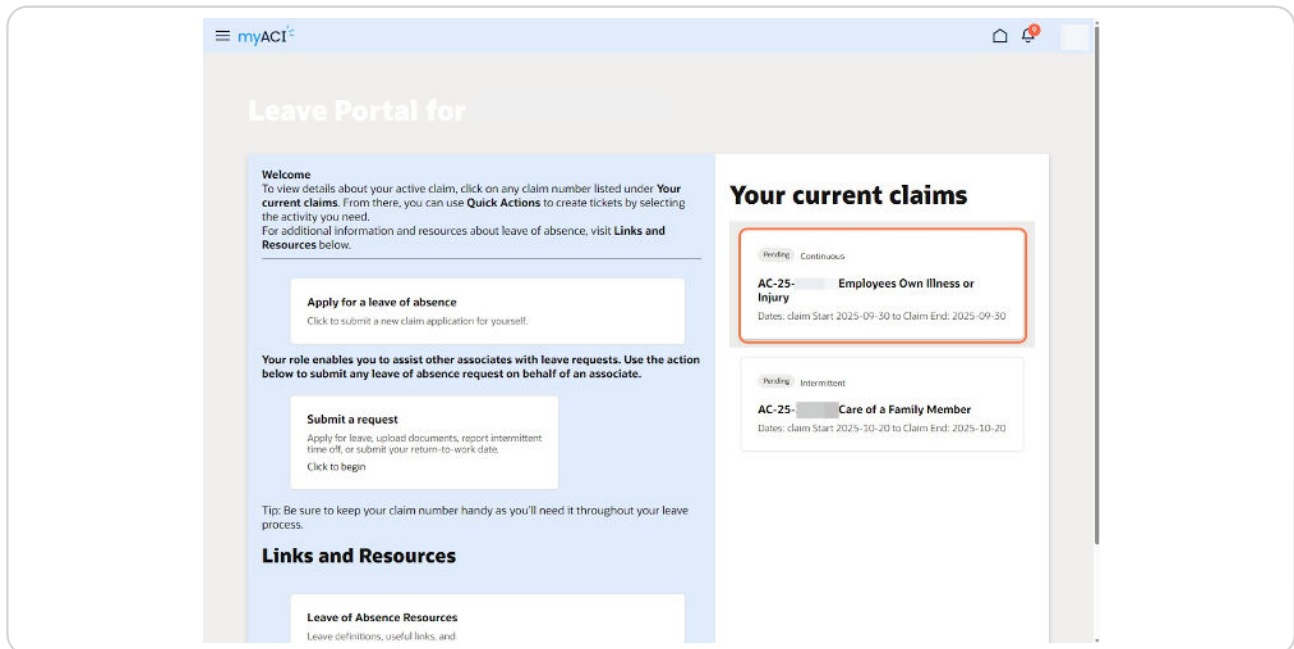
If you are an HR/People Leader submitting a Return from LOA on behalf of an associate, skip to step 14.



If you are an associate submitting a Return from leave for yourself, proceed to step 4.

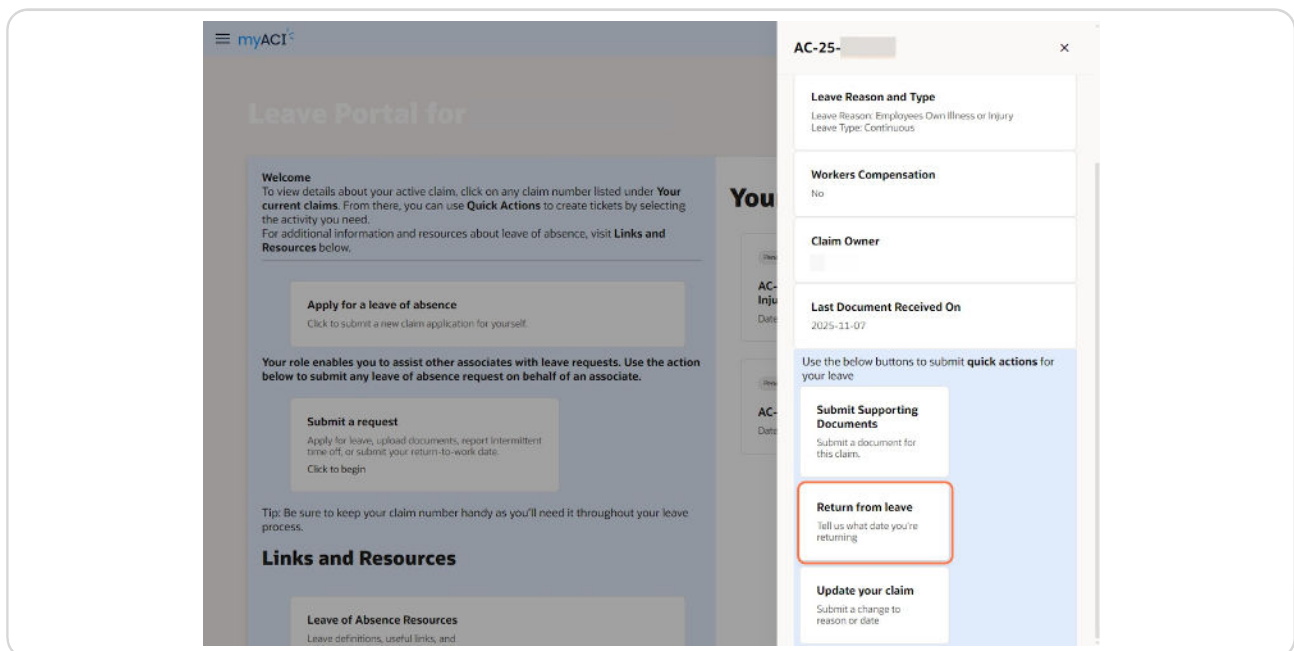
## STEP 4

Click on the claim number that you are returning from leave.



## STEP 5

Click on "Return from leave" in the quick action section.





For Employee Own Illness/Injury leaves, proceed to step 6.

**All other leave reasons, proceed to step 11.**



Employee Own Illness/Injury Steps 6 - 10.

## STEP 6

### Select the date you returned to work.

**NOTE:** By submitting this return-from-leave ticket, you acknowledge that you have returned to work on the date entered. Submitting false or inaccurate information may be subject to disciplinary actions.

The screenshot shows the 'Return From Leave' form in the myACI system. The form is titled 'Return From Leave' with a sub-header 'AC-25-38 Employees Own Illness or Injury'. It includes a 'Cancel' button and a 'Submit your Return from Leave' button. A warning message states: 'By submitting this return-from-leave ticket, you acknowledge that you have returned to work on the date entered. Submitting false or inaccurate information may be subject to disciplinary actions. Important: Return-to-work dates may be submitted up to two days prior to the actual return. Submissions made more than two days in advance will not be processed without further review.' Below this is a calendar for October 2025. The calendar shows the dates from Sunday to Saturday. The date 30 is highlighted with a red box. To the right of the calendar, there is a question: 'Has a return-to-work form been submitted to the centralized leave team?' with two radio button options: 'Yes, I have already submitted a return-to-work document' and 'No, I have not submitted a return-to-work document'. Below this is a section for 'Attachments (Optional)' with a 'Drag and Drop' area labeled 'Select or drop files here'.

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

## STEP 7

**For Employee Own Illness/Injury leaves, a return-to-work form or note **MUST** be submitted to the Centralized Leave Team (CLT) prior to returning to work.**

Select **YES** if a release has already been sent to the CLT **or** if one is being submitted on this form.

Select **NO** if no release has been sent to the CLT and one is NOT being submitted on this form.

The screenshot shows the 'Return From Leave' form in the myACI system. The form is titled 'Return From Leave' with the code 'AC-25-38' and the category 'Employees Own Illness or Injury'. It includes a 'Cancel' button and a 'Submit your Return from Leave' button. A disclaimer states: 'By submitting this return-from-leave ticket, you acknowledge that you have returned to work on the date entered. Submitting false or inaccurate information may be subject to disciplinary actions. Important: Return-to-work dates may be submitted up to two days prior to the actual return. Submissions made more than two days in advance will not be processed without further review.' Below this is a calendar for October 2025, with the 30th highlighted. To the right of the calendar is a required question: 'Has a return-to-work form been submitted to the centralized leave team?' with two radio button options: 'Yes, I have already submitted a return-to-work document' and 'No, I have not submitted a return-to-work document'. Below the question is an optional attachment section labeled 'Attachments (Optional)' with a 'Drag and Drop' area that says 'Select or drop files here'. A red chat icon is visible in the bottom right corner.

myACI

**Return From Leave**  
AC-25-38 Employees Own Illness or Injury

Cancel Submit your Return from Leave

By submitting this return-from-leave ticket, you acknowledge that you have returned to work on the date entered. **Submitting false or inaccurate information may be subject to disciplinary actions.**  
**Important:** Return-to-work dates may be submitted up to two days prior to the actual return. Submissions made more than two days in advance **will not** be processed without further review.

October 2025

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

Has a return-to-work form been submitted to the centralized leave team?

☐ Yes, I have already submitted a return-to-work document

☐ No, I have not submitted a return-to-work document

Required

Attachments (Optional)

**Drag and Drop**  
Select or drop files here

## STEP 8

**If YES was selected in step 7, confirm whether restrictions or limitations are present on the return-to-work form.**

*Some examples but not limited to: No lifting over 15 pounds, no prolonged standing, no use of right hand, and need to sit for 5 minutes every two hours.*

Select **YES**, I acknowledge that my return to work is subject to restrictions and / or limitations outlined by my healthcare provider.

Select **NO**, I acknowledge that no restrictions and / or limitations affect my ability to perform work-related duties.

**Return From Leave**  
AC-25-38 Employees Own Illness or Injury

By submitting this return-from-leave ticket, you acknowledge that you have returned to work on the date entered. **Submitting false or inaccurate information may be subject to disciplinary actions.**  
**Important:** Return-to-work dates may be submitted up to two days prior to the actual return. Submissions made more than two days in advance **will not** be processed without further review.

October 2025

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

Has a return-to-work form been submitted to the centralized leave team?

☒ Yes, I have already submitted a return-to-work document

☐ No, I have not submitted a return-to-work document

Please confirm whether restrictions or limitations are present on the return-to-work form. Some examples but not limited to: No lifting over 15 pounds, no prolonged standing, no use of right hand, and need to sit for 5 minutes every two hours.

☐ Yes, I acknowledge that my return to work is subject to restrictions and / or limitations outlined by my healthcare provider.

☐ No, I acknowledge that no restrictions and / or limitations affect my ability to perform work-related duties.

Attachments (Optional)

**Drag and Drop**  
Select or drop files here

## STEP 9

**Drag and Drop any documents in this section. If you selected YES in step 7 and have any documents, attach them here.**

**NOTE:** Documents must be in PDF or JPEG format no larger than 8MB.

**IMPORTANT:** Wait for the document to fully upload before moving to the next step.

The screenshot shows the 'Return From Leave' form in the myACI system. The form is titled 'Return From Leave' with a subtitle 'AC-25-38 Employees Own Illness or Injury'. It includes a 'Cancel' button and a 'Submit your Return from Leave' button. A warning message states: 'By submitting this return-from-leave ticket, you acknowledge that you have returned to work on the date entered. Submitting false or inaccurate information may be subject to disciplinary actions. Important: Return-to-work dates may be submitted up to two days prior to the actual return. Submissions made more than two days in advance will not be processed without further review.' Below this is a calendar for October 2025, showing dates from 1 to 31. To the right of the calendar, there is a section titled 'Has a return-to-work form been submitted to the centralized leave team?' with two radio button options: 'Yes, I have already submitted a return-to-work document' (selected) and 'No, I have not submitted a return-to-work document'. Below this, there is a text area for 'Please confirm whether restrictions or limitations are present on the return-to-work form. Some examples but not limited to: No lifting over 15 pounds, no prolonged standing, no use of right hand, and need to sit for 5 minutes every two hours.' There are two radio button options: 'Yes, I acknowledge that my return to work is subject to restrictions and / or limitations outlined by my healthcare provider.' and 'No, I acknowledge that no restrictions and / or limitations affect my ability to perform work-related duties.' Below this is a section titled 'Attachments (Optional)' with a 'Drag and Drop' area that says 'Select or drop files here'.

## STEP 10

Click on "Submit your Return from Leave" in the upper right corner of the screen to save and submit the return from leave request.

If you do not click on the Submit your Return from Leave button, the return from leave will not be submitted to the claim.

The screenshot shows the 'Return From Leave' form in the myACT system. The form is titled 'Return From Leave' with a subtitle 'AC-25-38 Employees Own Illness or Injury'. In the top right corner, there are two buttons: 'Cancel' and 'Submit your Return from Leave', with the latter being highlighted by a red rectangle. Below the title, a pink banner contains a disclaimer: 'By submitting this return-from-leave ticket, you acknowledge that you have returned to work on the date entered. Submitting false or inaccurate information may be subject to disciplinary actions. Important: Return-to-work dates may be submitted up to two days prior to the actual return. Submissions made more than two days in advance will not be processed without further review.'

On the left side, there is a calendar for October 2025. The dates are arranged in a grid with columns for Sun, Mon, Tue, Wed, Thu, Fri, and Sat. The date 29 is highlighted with a red border.

On the right side, there is a section titled 'Has a return-to-work form been submitted to the centralized leave team?' with two radio button options: 'Yes, I have already submitted a return-to-work document' (which is selected) and 'No, I have not submitted a return-to-work document'. Below this, there is a text prompt: 'Please confirm whether restrictions or limitations are present on the return-to-work form. Some examples but not limited to: No lifting over 15 pounds, no prolonged standing, no use of right hand, and need to sit for 5 minutes every two hours.' This is followed by two more radio button options: 'Yes, I acknowledge that my return to work is subject to restrictions and / or limitations outlined by my healthcare provider.' and 'No, I acknowledge that no restrictions and / or limitations affect my ability to perform work-related duties.'

At the bottom right, there is a section titled 'Attachments (Optional)' with a 'Drag and Drop' area that says 'Select or drop files here'.

 All other leave reason steps 11 – 13.

## STEP 11

### Select the date you returned to work.

**NOTE:** By submitting this return-from-leave ticket, you acknowledge that you have returned to work on the date entered. **Submitting false or inaccurate information may be subject to disciplinary actions.**

Return From Leave

AC-25-370250 Care of a Family Member

Cancel

Submit your Return from Leave

By submitting this return-from-leave ticket, you acknowledge that you have returned to work on the date entered. **Submitting false or inaccurate information may be subject to disciplinary actions.**

**Important:** Return-to-work dates may be submitted up to two days prior to the actual return. Submissions made more than two days in advance **will not** be processed without further review.

October 2025

< >

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

Attachments (Optional)

Drag and Drop

Select or drop files here

## STEP 12

**Drag and Drop any documents in this section.**

**NOTE:** Documents must be in PDF or JPEG format no larger than 8MB.

**IMPORTANT:** Wait for the document to fully upload before moving to the next step.

**Return From Leave**  
AC-25-37 Care of a Family Member

Cancel Submit your Return from Leave

By submitting this return-from-leave ticket, you acknowledge that you have returned to work on the date entered. **Submitting false or inaccurate information may be subject to disciplinary actions.**  
**Important:** Return-to-work dates may be submitted up to two days prior to the actual return. Submissions made more than two days in advance **will not** be processed without further review.

October 2025 < >

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

Attachments (Optional)

**Drag and Drop**  
Select or drop files here

...

## STEP 13

Click on "Submit your Return from Leave" in the upper right corner of the screen to save and submit the return from leave request.

If you do not click on the Submit your Return from Leave button, the return from leave will not be submitted to the claim.

**Return From Leave**  
AC-25-37 Care of a Family Member

Cancel Submit your Return from Leave

By submitting this return-from-leave ticket, you acknowledge that you have returned to work on the date entered. **Submitting false or inaccurate information may be subject to disciplinary actions.**  
**Important:** Return-to-work dates may be submitted up to two days prior to the actual return. Submissions made more than two days in advance will not be processed without further review.

October 2025 < >

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

Attachments (Optional)

**Drag and Drop**  
Select or drop files here

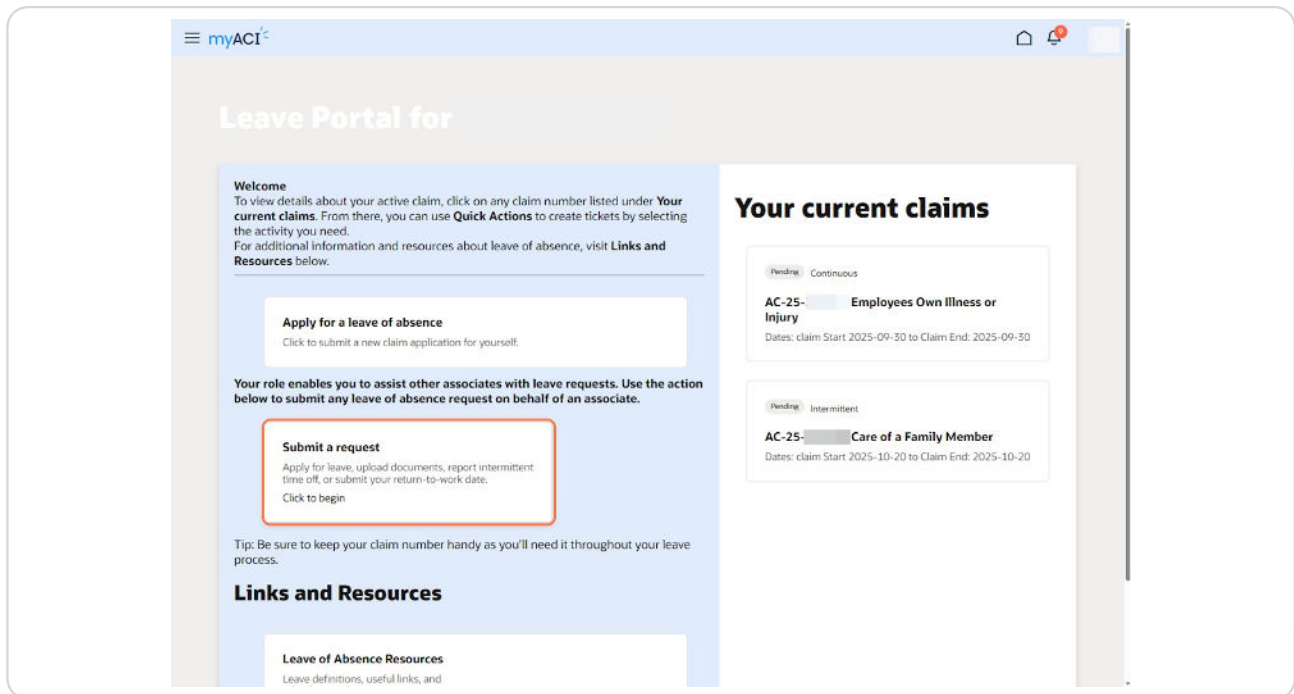


HR/People Leader submitting a Return from LOA on behalf of an associate, start here.

## STEP 14

Click on "Submit a request" to navigate to submit Return from LOA request.

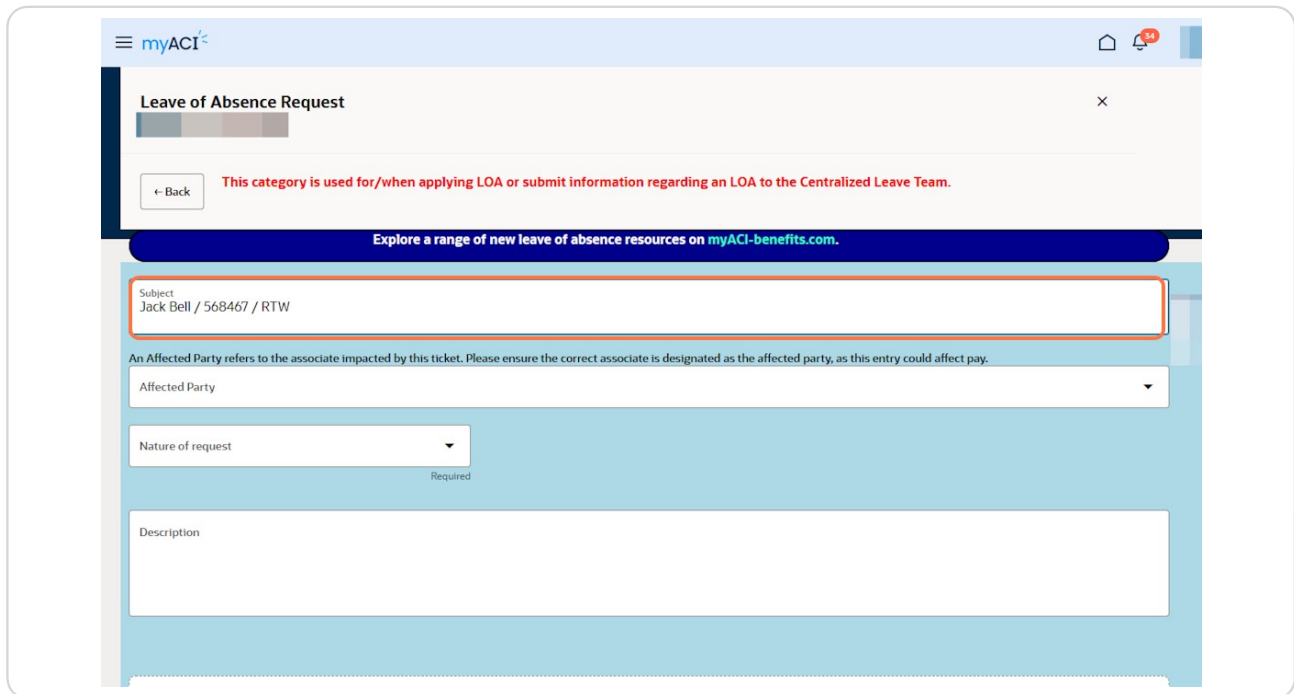
**HR/People Leader:** Be sure to have the CV Number for the associates claim you are submitting the return from leave for, as you will need it when submitting the ticket.



## STEP 15

Enter the subject for the leave request.

**EXAMPLE:** Jack Bell / 568467 / RTW

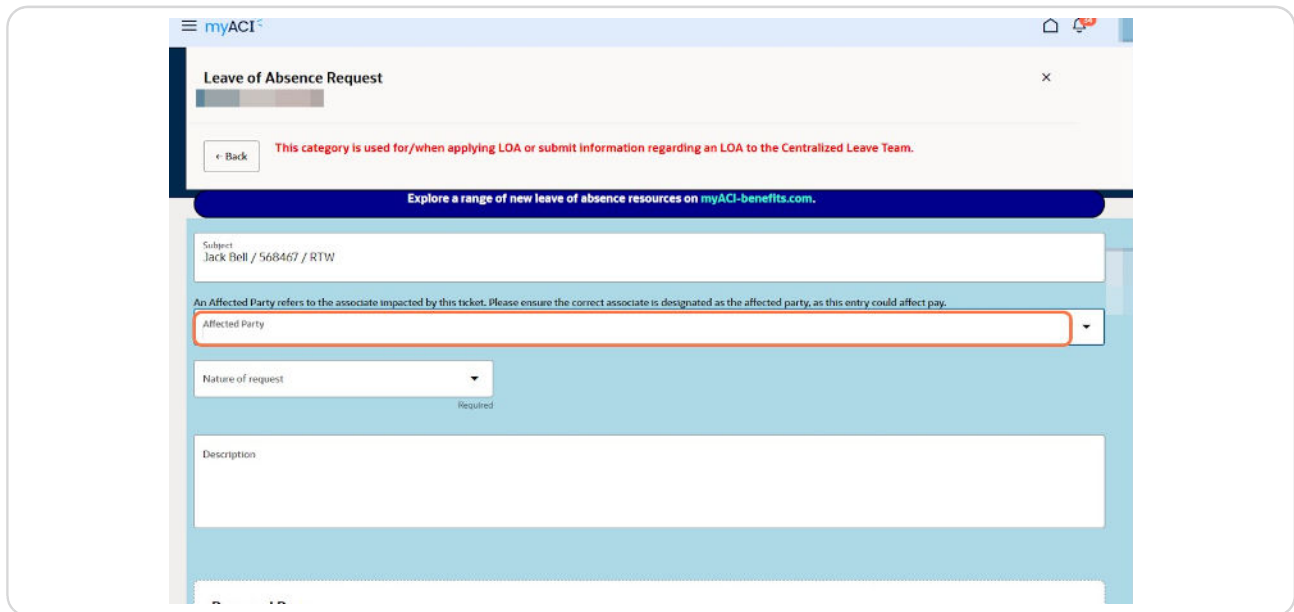


The screenshot shows a web application interface for submitting a "Leave of Absence Request". At the top, there is a navigation bar with the "myACI" logo and a home icon. Below this, a header section contains the title "Leave of Absence Request" and a close button (X). A red message states: "This category is used for/when applying LOA or submit information regarding an LOA to the Centralized Leave Team." Below the message is a blue banner with the text: "Explore a range of new leave of absence resources on [myACI-benefits.com](#)." The main form area has a light blue background. It includes a "Subject" field with the text "Jack Bell / 568467 / RTW", which is highlighted with a red border. Below the subject field is a note: "An Affected Party refers to the associate impacted by this ticket. Please ensure the correct associate is designated as the affected party, as this entry could affect pay." This is followed by an "Affected Party" dropdown menu. Below that is a "Nature of request" dropdown menu, marked as "Required". At the bottom is a large "Description" text area.

## STEP 16

In the Affected Party, enter the Employee ID (EID) of the associate who the Return from Leave request is for.

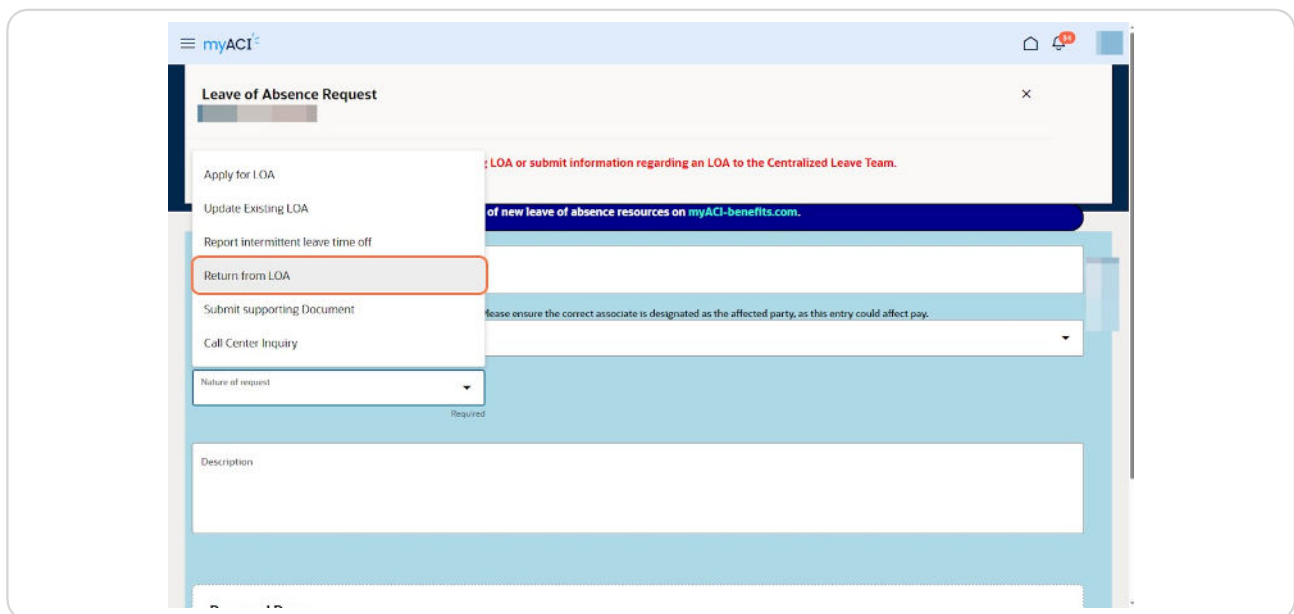
An Affected Party refers to the associate impacted by this ticket.



The screenshot shows the 'Leave of Absence Request' form in the myACI system. The form includes a 'Subject' field with the text 'Jack Bell / 568467 / RTW'. Below this is a red warning message: 'This category is used for/when applying LOA or submit information regarding an LOA to the Centralized Leave Team.' A blue banner below the warning reads: 'Explore a range of new leave of absence resources on myACI-benefits.com.' The 'Affected Party' field is highlighted with a red border. Below it is the 'Nature of request' dropdown menu, which is currently set to 'Required'. The 'Description' field is also visible.

## STEP 17

Select "Return from LOA" from request category.



The screenshot shows the 'Leave of Absence Request' form in the myACI system. The 'Nature of request' dropdown menu is open, and the 'Return from LOA' option is selected and highlighted with a red border. The other options in the dropdown are 'Apply for LOA', 'Update Existing LOA', 'Report intermittent leave time off', 'Submit supporting Document', and 'Call Center Inquiry'. The 'Description' field is also visible.

## STEP 18

For "What is the leave reason you're returning from", select the correct leave reason the associate is returning from leave.

**NOTE:** By submitting this return-from-leave ticket, you acknowledge that you have returned to work on the date entered. Submitting false or inaccurate information may be subject to disciplinary actions.

Nature of request  
Return from LOA

By submitting this return-from-leave ticket, you acknowledge that you have returned to work on the date entered. Submitting false or inaccurate information may be subject to disciplinary actions. If you are submitting on behalf of an associate, ensure the return-to-work date entered is accurate. Return-to-work dates may be submitted up to two days prior to the actual return.

What is the leave reason you're returning from?

Adoption/Foster Care  
Bereavement  
Bonding  
Bone Marrow Donation  
Care of a Family Member  
Employees Own Illness or Injury  
Military Leave  
Organ Donation

Please confirm that all attachments have been fully uploaded and processed before submitting the ticket. Otherwise, it can cause issues when viewing the attachments

**Drag and Drop**  
Select or drop files here.

File Name File Size

No data to display.

Save



If the associate is returning from an Employee Own Illness/Injury leave, proceed to step 19.

**All other leave reasons, proceed to step 26.**



Employee Own Illness/Injury Steps 19 - 25.

## STEP 19

**For Employee Own Illness/Injury leaves, a return-to-work form or note **MUST** be submitted to the Centralized Leave Team (CLT) prior to the associate returning to work.**

Select **YES** if a release has already been sent to the CLT **or** if one is being submitted on this form.

Select **NO** if no release has been sent to the CLT and one is NOT being submitted on this form.

The screenshot shows a web form for returning from leave. The form has a light blue header and a white body. The first section is titled 'Nature of request' with a dropdown menu set to 'Return from LOA'. Below this is a red warning message: 'By submitting this return-from-leave ticket, you acknowledge that you have returned to work on the date entered. Submitting false or inaccurate information may be subject to disciplinary actions. If you are submitting on behalf of an associate, ensure the return-to-work date entered is accurate. Return-to-work dates may be submitted up to two days prior to the actual return.' The next section is 'What is the leave reason you're returning from?' with a dropdown menu set to 'Employees Own Illness or Injury'. To the right of this is a dropdown menu titled 'Has a return-to-work form been submitted to Centralized Leave Team (CLT)?' with options 'Yes' and 'No'. This dropdown is highlighted with a red rectangular box. Below this is a text input field for 'ClaimVantage AC Number (Found on any LOA letter)'. The next section is 'Date employee returned from leave' with a calendar icon and a 'Required' label. Below this is a large text area for 'Description'. At the bottom, there is a red warning message: 'Please confirm that all attachments have been fully uploaded and processed before submitting the ticket. Otherwise, it can cause issues when viewing the attachments'. Below this is a 'Drag and Drop' section with the text 'Select or drop files here.' and a table with columns 'File Name' and 'File Size'. The table currently shows 'No data to display.' and there is a red speech bubble icon in the bottom right corner.

## STEP 20

**If YES was selected in step 19, confirm whether restrictions or limitations are present on the return-to-work form.**

*Some examples but not limited to: No lifting over 15 pounds, no prolonged standing, no use of right hand, and need to sit for 5 minutes every two hours.*

Select **YES**, I acknowledge that my return to work is subject to restrictions and / or limitations outlined by my healthcare provider.

Select **NO**, I acknowledge that no restrictions and / or limitations affect my ability to perform work-related duties.

An Affected Party refers to the associate impacted by this ticket. Please ensure the correct associate is designated as the affected party, as this entry could affect pay.

Affected Party  
Kristen Smith

Nature of request  
Return from LOA

By submitting this return-from-leave ticket, you acknowledge that you have returned to work on the date entered. Submitting false or inaccurate information may be subject to disciplinary actions. If you are submitting on behalf of an associate, ensure the return-to-work date entered is accurate. Return-to-work dates may be submitted up to two days prior to the actual return.

What is the leave reason you're returning from?  
Employees Own Illness or Injury

Has a return-to-work form been submitted to Centralized Leave Team (CLT)?  
Yes

Does the form indicate any work restrictions or limit...  
Yes  
No

%, no prolonged standing, no use of right hand, need to sit for 5 minutes every two hours).

Date employee returned from leave  
Required

Description

Please confirm that all attachments have been fully uploaded and processed before submitting the ticket. Otherwise, it can cause issues when viewing the attachments

Drag and Drop  
Click or drag files here

## STEP 21

Enter the leave of absence claim number (ClaimVantage AC#). This can be found on email notifications that are sent from the Centralized Leave Team (CLT).

**EXAMPLE:** AC-24-123456.

**DO NOT SKIP THIS STEP.** It's important that we have the accurate case number.

The screenshot shows a web form titled "Return from LOA". At the top, there is a dropdown menu for "Nature of request" with "Return from LOA" selected. Below this is a red warning message: "By submitting this return-from-leave ticket, you acknowledge that you have returned to work on the date entered. Submitting false or inaccurate information may be subject to disciplinary actions. If you are submitting on behalf of an associate, ensure the return-to-work date entered is accurate. Return-to-work dates may be submitted up to two days prior to the actual return." The form contains several dropdown menus: "What is the leave reason you're returning from?" (selected: "Employees Own illness or Injury"), "Has a return-to-work form been submitted to Centralized Leave Team (CLT)?" (selected: "Yes"), and "Does the form indicate any work restrictions or limit..." (selected: "No"). Below these is a text box for "ClaimVantage AC Number (Found on any LOA letter)" which is highlighted with a red border. A small note below the text box says "Enter 12 or fewer characters." To the right of the text box is a "Date employee returned from leave" field with a calendar icon and a "Required" label. Below the date field is a large "Description" text area. At the bottom, there is a "Drag and Drop" section with the text "Select or drop files here." and a table with columns "File Name" and "File Size". A red chat icon is in the bottom right corner.

## STEP 22

### Select the date the associate returned to work.

**NOTE:** By submitting this return-from-leave ticket, you acknowledge that you have returned to work on the date entered. Submitting false or inaccurate information may be subject to disciplinary actions.

The screenshot shows a web form titled "Return from LOA". At the top, there is a dropdown menu for "Nature of request" with "Return from LOA" selected. Below this is a red warning message: "By submitting this return-from-leave ticket, you acknowledge that you have returned to work on the date entered. Submitting false or inaccurate information may be subject to disciplinary actions. If you are submitting on behalf of an associate, ensure the return-to-work date entered is accurate. Return-to-work dates may be submitted up to two days prior to the actual return." The form contains several dropdown menus: "What is the leave reason you're returning from?" (selected: "Employees Own Illness or Injury"), "Has a return-to-work form been submitted to Centralized Leave Team (CLT)?" (selected: "Yes"), and "Does the form indicate any work restrictions or limit..." (selected: "No"). Below these is a text box for "Claim/Vantage AC Number (Found on any LOA letter)" containing "AC-25-368791". A date picker is open for the field "Date employee returned from leave", showing a calendar for November 2025. The date "5" is highlighted. At the bottom, there is a table with columns "File Name" and "File Size", which is currently empty with the text "No data to display." and a red chat bubble icon in the bottom right corner.

Nature of request  
Return from LOA

By submitting this return-from-leave ticket, you acknowledge that you have returned to work on the date entered. Submitting false or inaccurate information may be subject to disciplinary actions. If you are submitting on behalf of an associate, ensure the return-to-work date entered is accurate. Return-to-work dates may be submitted up to two days prior to the actual return.

What is the leave reason you're returning from?  
Employees Own Illness or Injury

Has a return-to-work form been submitted to Centralized Leave Team (CLT)?  
Yes

Does the form indicate any work restrictions or limit...  
No

(Some examples but not limited to: No lifting over 15 pounds, no prolonged standing, no use of right hand, need to sit for 5 minutes every two hours).

Claim/Vantage AC Number (Found on any LOA letter)  
AC-25-368791

Date employee returned from leave

November 2025

File Name	File Size
No data to display.	

## STEP 23

Use the detailed description box to enter any additional information about the return from leave request.

Return from LOA

By submitting this return-from-leave ticket, you acknowledge that you have returned to work on the date entered. Submitting false or inaccurate information may be subject to disciplinary actions. If you are submitting on behalf of an associate, ensure the return-to-work date entered is accurate. Return-to-work dates may be submitted up to two days prior to the actual return.

What is the leave reason you're returning from?  
Employees Own Illness or Injury

Has a return-to-work form been submitted to Centralized Leave Team (CLT)?  
Yes

Does the form indicate any work restrictions or limit...  
No

(Some examples but not limited to: No lifting over 15 pounds, no prolonged standing, no use of right hand, need to sit for 5 minutes every two hours).

Claim/Vantage AC Number (Found on any LOA letter)  
AC-25-36

Date employee returned from leave

Required

Description

Please confirm that all attachments have been fully uploaded and processed before submitting the ticket. Otherwise, it can cause issues when viewing the attachments.

Drag and Drop

Select or drop files here.

File Name

File Size

No data to display.

Created with *Tango*

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## STEP 24

**Drag and Drop any documents in this section. If you selected YES in step 19 and have any documents, attach them here.**

**NOTE:** Documents must be in PDF or JPEG format no larger than 8MB.

**IMPORTANT:** Wait for the document to fully upload before moving to the next step.

The screenshot shows a web form titled "Return from LOA". At the top, a red warning message states: "By submitting this return-from-leave ticket, you acknowledge that you have returned to work on the date entered. Submitting false or inaccurate information may be subject to disciplinary actions. If you are submitting on behalf of an associate, ensure the return-to-work date entered is accurate. Return-to-work dates may be submitted up to two days prior to the actual return." Below this, there are several dropdown menus: "What is the leave reason you're returning from?" (selected: Employees Own Illness or Injury), "Has a return-to-work form been submitted to Centralized Leave Team (CLT)?" (selected: Yes), and "Does the form indicate any work restrictions or limit..." (selected: No). A text box for "ClaimVantage AC Number (Found on any LOA letter)" contains "AC-25-36". A date picker for "Date employee returned from leave" is marked as "Required". A large text area for "Description" is empty. At the bottom, a red-bordered box highlights the "Drag and Drop" section, which includes the text "Select or drop files here." Below this is a table with columns "File Name" and "File Size", currently showing "No data to display." A red chat icon is in the bottom right corner.

Return from LOA

By submitting this return-from-leave ticket, you acknowledge that you have returned to work on the date entered. Submitting false or inaccurate information may be subject to disciplinary actions. If you are submitting on behalf of an associate, ensure the return-to-work date entered is accurate. Return-to-work dates may be submitted up to two days prior to the actual return.

What is the leave reason you're returning from?  
Employees Own Illness or Injury

Has a return-to-work form been submitted to Centralized Leave Team (CLT)?  
Yes

Does the form indicate any work restrictions or limit...  
No

(Some examples but not limited to: No lifting over 15 pounds, no prolonged standing, no use of right hand, need to sit for 5 minutes every two hours).

ClaimVantage AC Number (Found on any LOA letter)  
AC-25-36

Date employee returned from leave Required

Description

Please confirm that all attachments have been fully uploaded and processed before submitting the ticket. Otherwise, it can cause issues when viewing the attachments

**Drag and Drop**  
Select or drop files here.

File Name	File Size
No data to display.	

## STEP 25

Click on "Save" in the lower left corner of the screen to save and submit the return from LOA request.

**NOTE:** If you do not click "Save", the return from leave will not be submitted to the claim.

What is the leave reason you're returning from?  
Employees Own Illness or Injury

Has a return-to-work form been submitted to Centralized Leave Team (CLT)?  
Yes

Does the form indicate any work restrictions or limit...  
No

(Some examples but not limited to: No lifting over 15 pounds, no prolonged standing, no use of right hand, need to sit for 5 minutes every two hours).

Claim/Vantage AC Number (Found on any LOA letter)  
AC-25-36

Date employee returned from leave  
Required

Description

Please confirm that all attachments have been fully uploaded and processed before submitting the ticket. Otherwise, it can cause issues when viewing the attachments

**Drag and Drop**  
Select or drop files here.

File Name	File Size
No data to display.	

Save

**i** All other leave reason steps 26 - 29.

## STEP 26

Enter the leave of absence claim number (ClaimVantage AC#). This can be found on email notifications that are sent from the Centralized Leave Team (CLT).

**EXAMPLE:** AC-24-123456.

**DO NOT SKIP THIS STEP.** It's important that we have the accurate case number.

Explore a range of new leave of absence resources on [myACI-benefits.com](https://myACI-benefits.com).

Subject  
Jack Bell / 568467 / RTW

An Affected Party refers to the associate impacted by this ticket. Please ensure the correct associate is designated as the affected party, as this entry could affect pay.

Affected Party

Nature of request  
Return from LOA

By submitting this return from leave ticket, you acknowledge that you have returned to work on the date entered. Submitting false or inaccurate information may be subject to disciplinary actions. If you are submitting on behalf of an associate, ensure the return-to-work date entered is accurate. Return-to-work dates may be submitted up to two days prior to the actual return.

What is the leave reason you're returning from?  
Care of a Family Member

ClaimVantage AC Number (Found on any LOA letter)

Enter 12 or fewer characters.

Date employee returned from leave

Required

## STEP 27

### Select the date the associate returned to work.

**NOTE:** By submitting this return-from-leave ticket, you acknowledge that you have returned to work on the date entered. Submitting false or inaccurate information may be subject to disciplinary actions.

The screenshot shows a web form for submitting a return-from-leave ticket. At the top, a blue banner reads "Explore a range of new leave of absence resources on [myACI-benefits.com](#)". Below this, the subject line identifies the employee as "Jack Bell / 568467 / RTW". A date picker calendar for September 2025 is open, with the 10th highlighted. To the right of the calendar, a dropdown menu is visible with the text "Please ensure the correct associate is designated as the affected party, as this entry could affect pay." Below the calendar, a text field is labeled "Date employee returned from leave" and marked as "Required". Further down is a large text area labeled "Description". At the bottom, a red warning message states: "Please confirm that all attachments have been fully uploaded and processed before submitting the ticket. Otherwise, it can cause issues when viewing the attachments". Below the warning is a "Drag and Drop" section with the text "Select or drop files here."

Explore a range of new leave of absence resources on [myACI-benefits.com](#).

Subject  
Jack Bell / 568467 / RTW

September 2025

10

Please ensure the correct associate is designated as the affected party, as this entry could affect pay.

Date employee returned from leave

Required

Description

Please confirm that all attachments have been fully uploaded and processed before submitting the ticket. Otherwise, it can cause issues when viewing the attachments

**Drag and Drop**  
Select or drop files here.

## STEP 28

Use the detailed description box to enter any additional information about the return from leave request.

Explore a range of new leave of absence resources on [myACI-benefits.com](https://myACI-benefits.com).

Subject  
Jack Bell / 568467 / RTW

An Affected Party refers to the associate impacted by this ticket. Please ensure the correct associate is designated as the affected party, as this entry could affect pay.

Affected Party

Nature of request  
Return from LOA

By submitting this return-from-leave ticket, you acknowledge that you have returned to work on the date entered. Submitting false or inaccurate information may be subject to disciplinary actions. If you are submitting on behalf of an associate, ensure the return-to-work date entered is accurate. Return-to-work dates may be submitted up to two days prior to the actual return.

What is the leave reason you're returning from?  
Care of a Family Member

ClaimVantage AC Number (Found on any LOA letter)  
AC-24-123456

Date employee returned from leave  
09/08/2025

Description

Please confirm that all attachments have been fully uploaded and processed before submitting the ticket. Otherwise, it can cause issues when viewing the attachments

**Drag and Drop**  
Select or drop files here.

## STEP 29

Click on "Save" in the lower left corner of the screen to save and submit the return from leave request.

**NOTE:** If you do not click "Save", the return from leave will not be submitted to the claim.

Description

Please confirm that all attachments have been fully uploaded and processed before submitting the ticket. Otherwise, it can cause issues when viewing the attachments

**Drag and Drop**  
Select or drop files here.

File Name File Size

No data to display.

**Save**