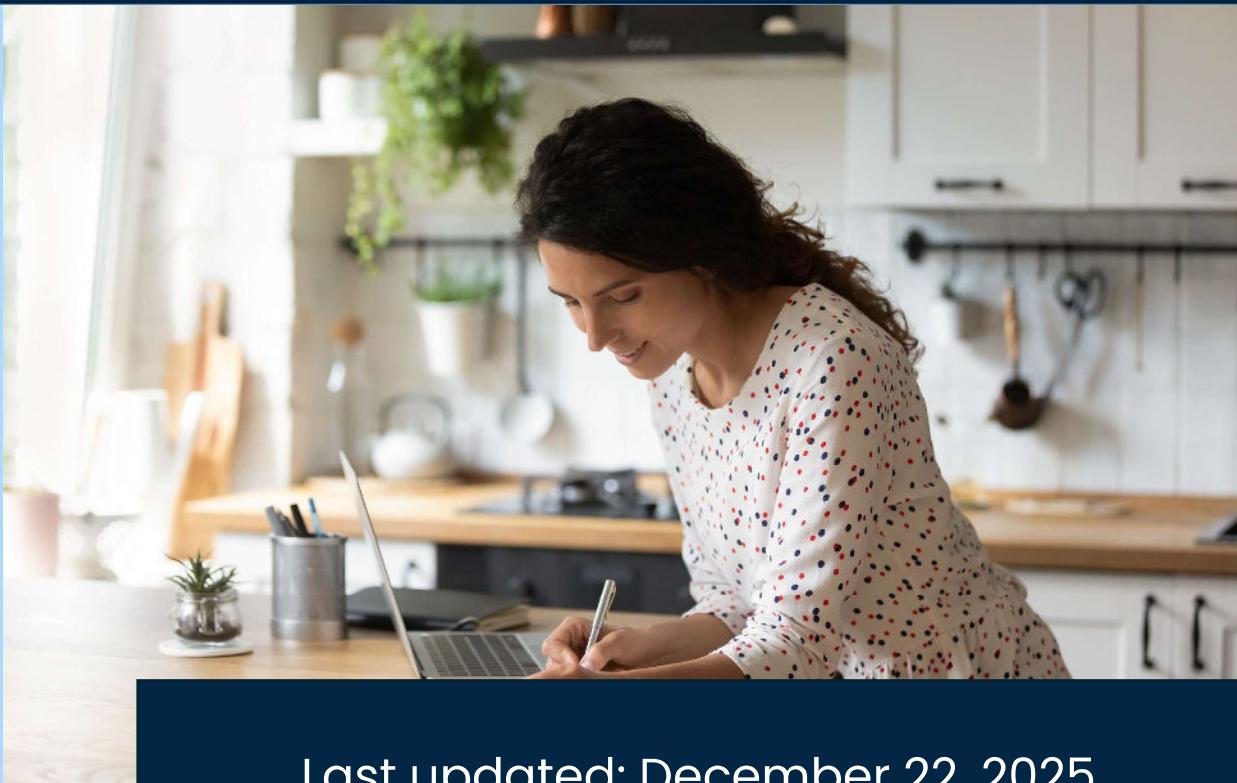


# QRG

## Quick Reference Guide (1-29 Steps)

### How to Process Return from Leave of Absence

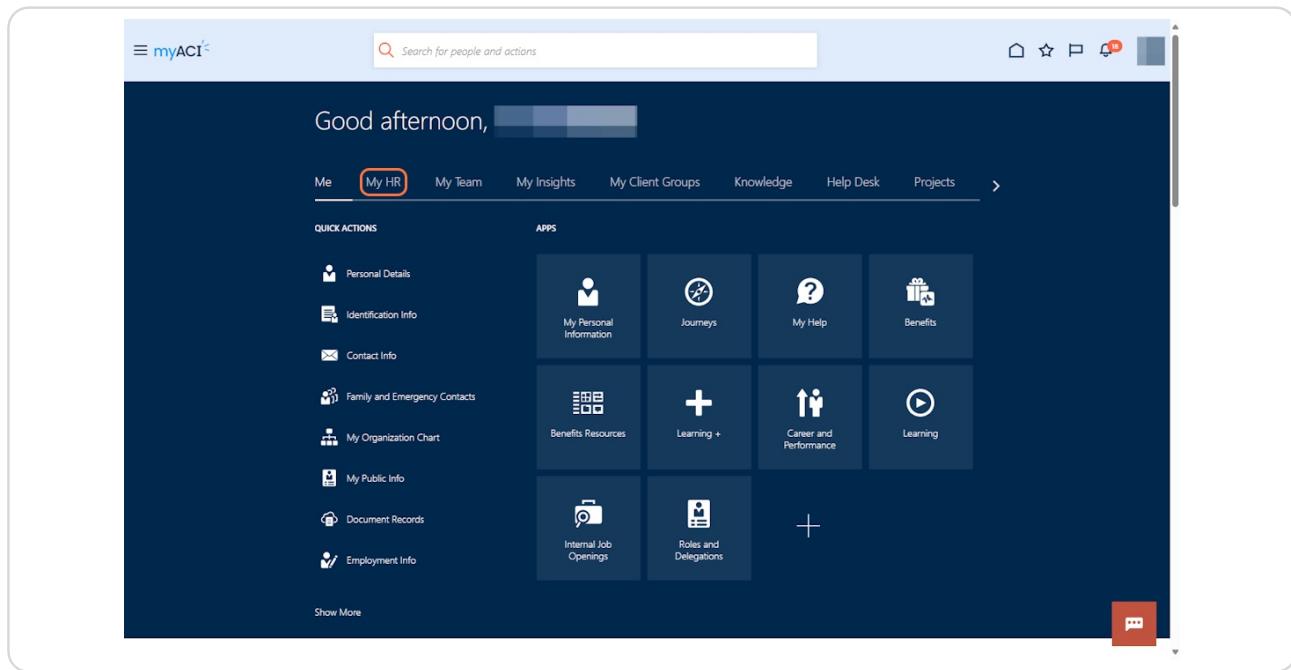
This QRG is for managers, HR representatives and associates on how to submit a Return from Leave of absence (LOA) request.



Last updated: December 22, 2025

## STEP 1

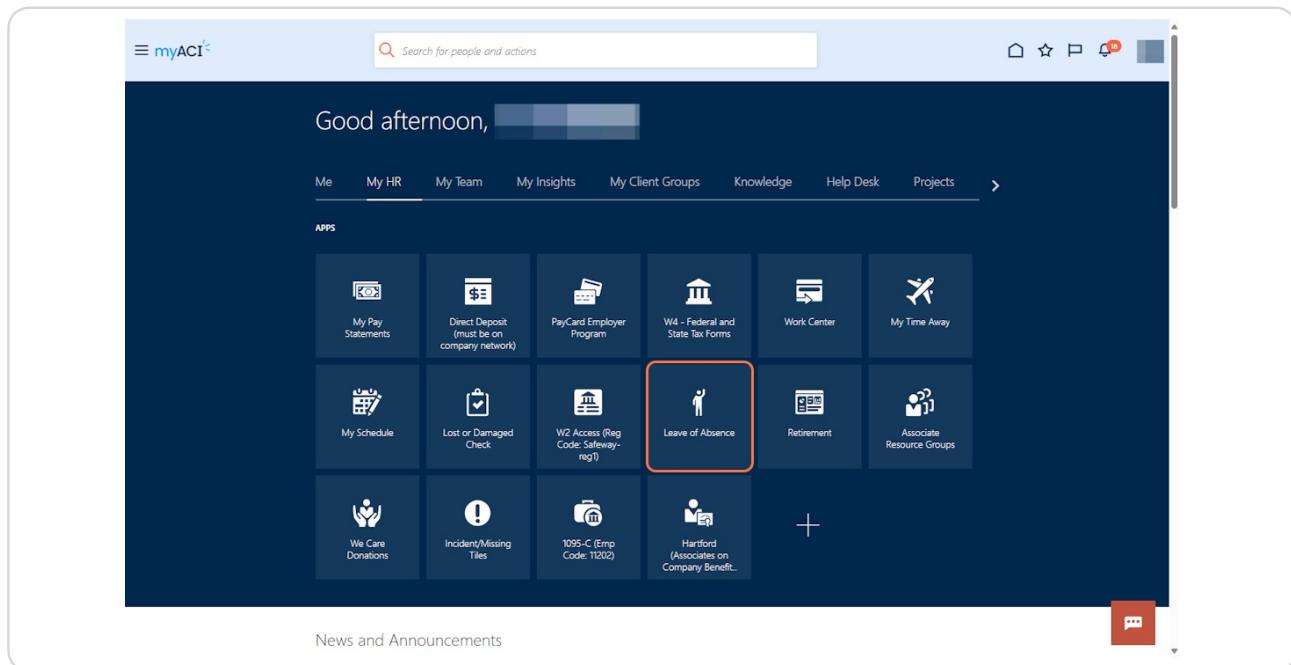
Sign in to myACI then click on My HR.



The screenshot shows the myACI application interface. At the top, there is a navigation bar with links: Me, My HR (which is highlighted with a red oval), My Team, My Insights, My Client Groups, Knowledge, Help Desk, and Projects. Below the navigation bar is a search bar with the placeholder text "Search for people and actions". The main content area has a dark blue background. On the left, there is a "QUICK ACTIONS" column with icons for Personal Details, Identification Info, Contact Info, Family and Emergency Contacts, My Organization Chart, My Public Info, Document Records, and Employment Info. On the right, there is a grid of "APPS" with the following items: My Personal Information, Journeys, My Help, Benefits, Benefits Resources, Learning +, Career and Performance, Learning, Internal Job Openings, and Roles and Delegations. A "Show More" link is located at the bottom left of the app grid. A red box highlights the "My HR" tab in the navigation bar.

## STEP 2

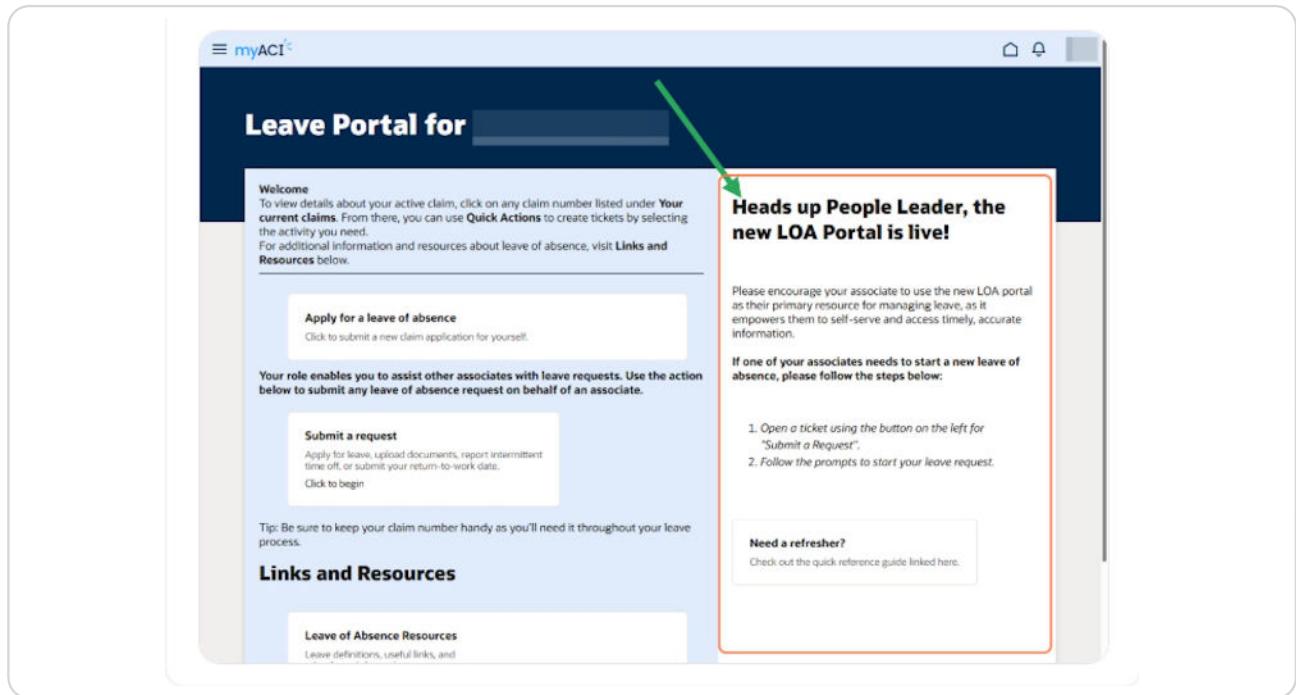
**Click on Leave of Absence**



The screenshot shows the myACI application interface, similar to the previous one but with a different app grid. The navigation bar is the same: Me, My HR (selected), My Team, My Insights, My Client Groups, Knowledge, Help Desk, and Projects. The main content area has a dark blue background. The "APPS" grid contains the following items: My Pay Statements, Direct Deposit (must be on company network), PayCard Employer Program, W4 - Federal and State Tax Forms, Work Center, My Time Away, My Schedule, Lost or Damaged Check, W2 Access (Reg Code: Safeway-reg1), Leave of Absence (which is highlighted with a red box), Retirement, and Associate Resource Groups. Below the grid, there is a "News and Announcements" section. A red box highlights the "Leave of Absence" app in the grid.

## 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.

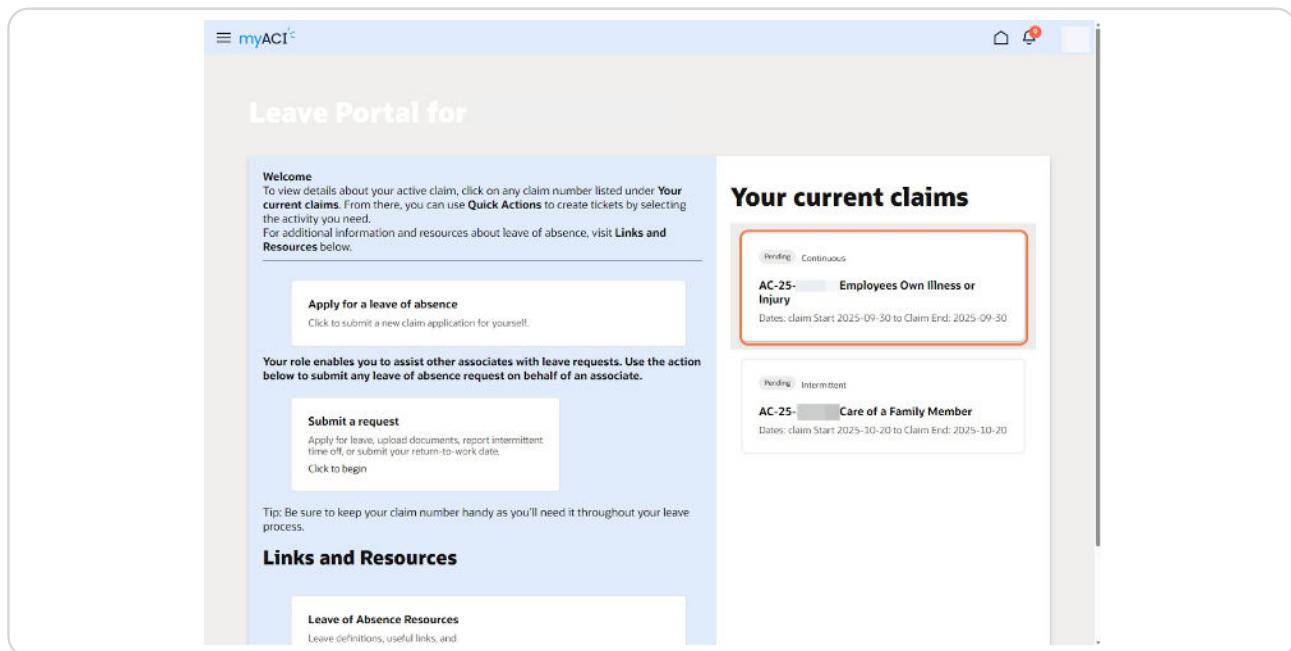


**i** If you are an HR/People Leader submitting a Return from LOA on behalf of an associate, skip to step 14.

**i** 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.



Leave Portal for

Welcome

To view details about your active claim, click on any claim number listed under **Your current claims**. From there, you can use **Quick Actions** to create tickets by selecting the activity you need. For additional information and resources about leave of absence, visit **Links and Resources** below.

**Apply for a leave of absence**

Click to submit a new claim application for yourself.

Your role enables you to assist other associates with leave requests. Use the action below to submit any leave of absence request on behalf of an associate.

**Submit a request**

Apply for leave, upload documents, report intermittent time off, or submit your return-to-work date. Click to begin

Tip: Be sure to keep your claim number handy as you'll need it throughout your leave process.

**Links and Resources**

**Leave of Absence Resources**

Leave definitions, useful links, and

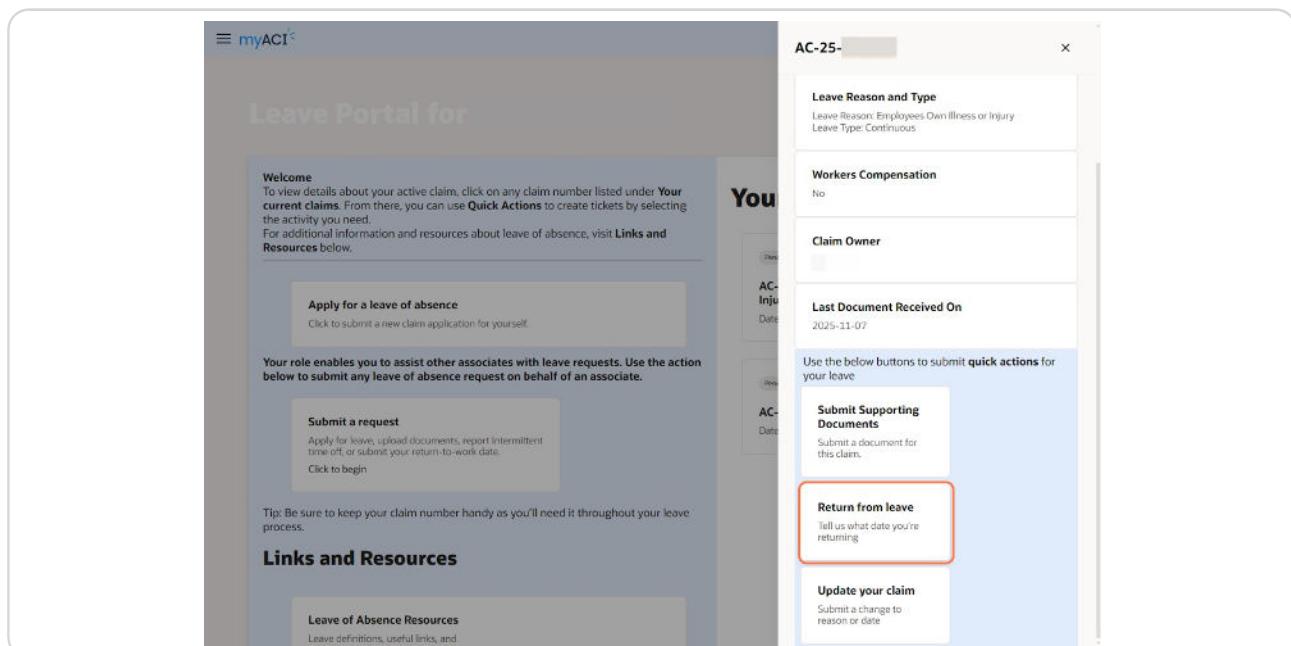
**Your current claims**

**AC-25- Continuous** Employees Own Illness or Injury  
Dates: claim Start: 2025-09-30 to Claim End: 2025-09-30

**AC-25- Intermittent** Care of a Family Member  
Dates: claim Start: 2025-10-20 to Claim End: 2025-10-20

## STEP 5

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



Leave Portal for

Welcome

To view details about your active claim, click on any claim number listed under **Your current claims**. From there, you can use **Quick Actions** to create tickets by selecting the activity you need. For additional information and resources about leave of absence, visit **Links and Resources** below.

**Apply for a leave of absence**

Click to submit a new claim application for yourself.

Your role enables you to assist other associates with leave requests. Use the action below to submit any leave of absence request on behalf of an associate.

**Submit a request**

Apply for leave, upload documents, report intermittent time off, or submit your return-to-work date. Click to begin

Tip: Be sure to keep your claim number handy as you'll need it throughout your leave process.

**Links and Resources**

**Leave of Absence Resources**

Leave definitions, useful links, and

**AC-25-**

**Leave Reason and Type**  
Leave Reason: Employees Own Illness or Injury  
Leave Type: Continuous

**Workers Compensation**  
No

**Claim Owner**

**Last Document Received On**  
2025-11-07

Use the below buttons to submit quick actions for your leave

**Submit Supporting Documents**  
Submit a document for this claim.

**Return from leave** Tell us what date you're returning

**Update your claim**  
Submit a change to reason or date

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 a web-based form titled 'Return From Leave' for 'Employees Own Illness or Injury'. The form includes a calendar for October 2025, a question about a return-to-work form submission, and a file upload section.

**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

Required  
Attachments (Optional)

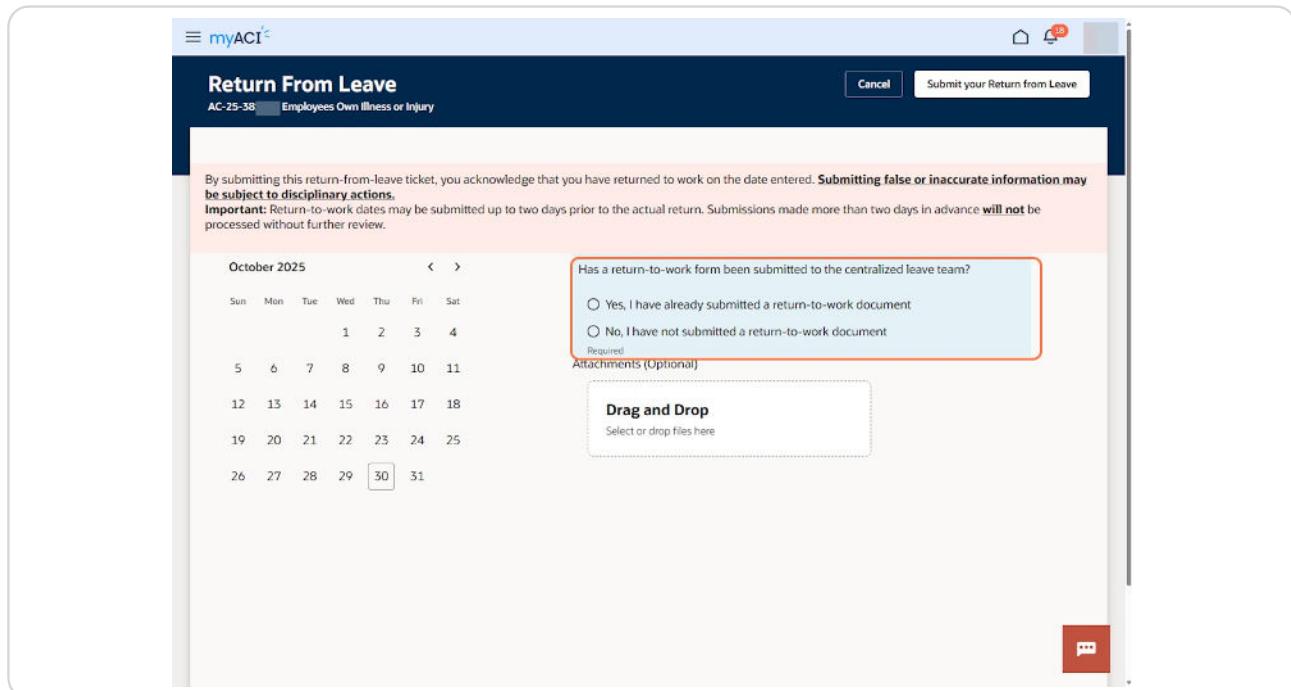
Drag and Drop  
Select or drop files here

## 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.



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

Attachments (Optional)

Drag and Drop  
Select or drop files here

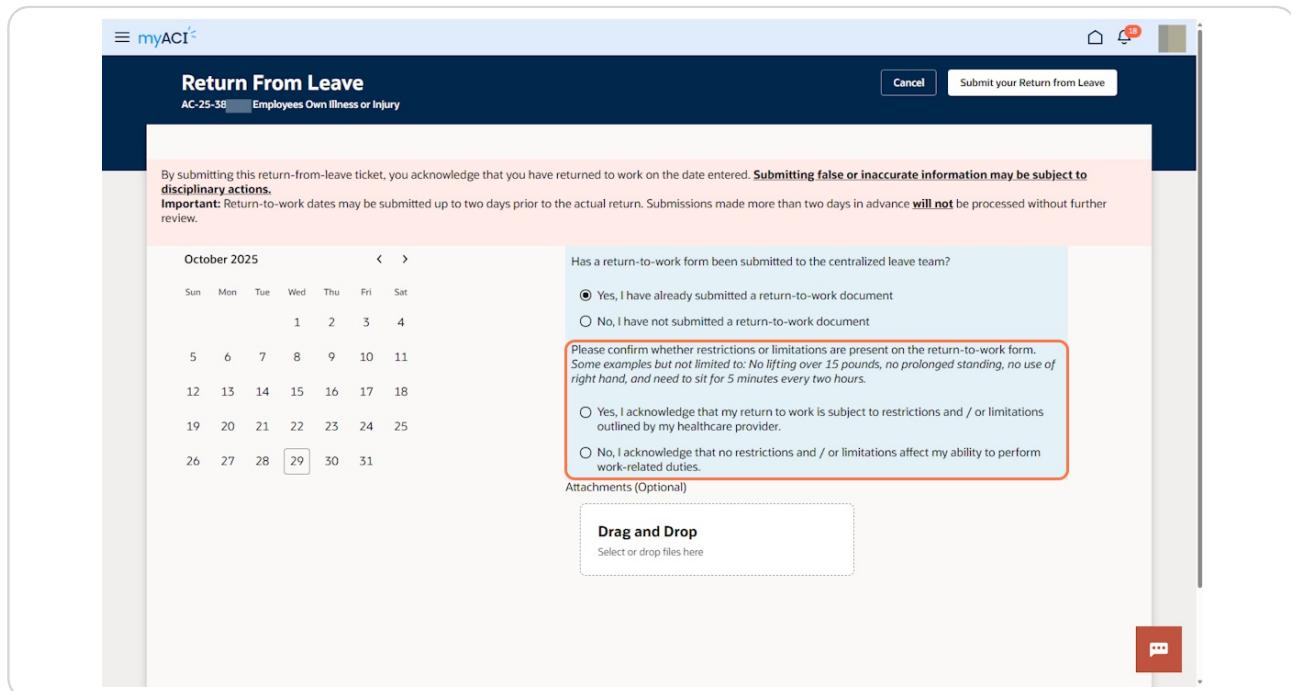
## STEP 8

**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.



The screenshot shows a web-based application for 'Return From Leave' (Form AC-25-58, Employees Own Illness or Injury). The page includes a navigation bar with 'myACI', a home icon, and a 'Logout' button. A 'Cancel' button and a 'Submit your Return from Leave' button are at the top right. The main content area has a pink header bar with instructions about submitting false information and a note about early submissions. Below this is a calendar for October 2025. To the right of the calendar, there are two questions with radio button options. The first question asks if a return-to-work form has been submitted to the centralized leave team, with 'Yes' selected. The second question asks if the return-to-work form is subject to restrictions or limitations, with 'Yes' also selected. A note below the second question provides examples of such restrictions. At the bottom, there is a 'Drag and Drop' area for attachments.

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.

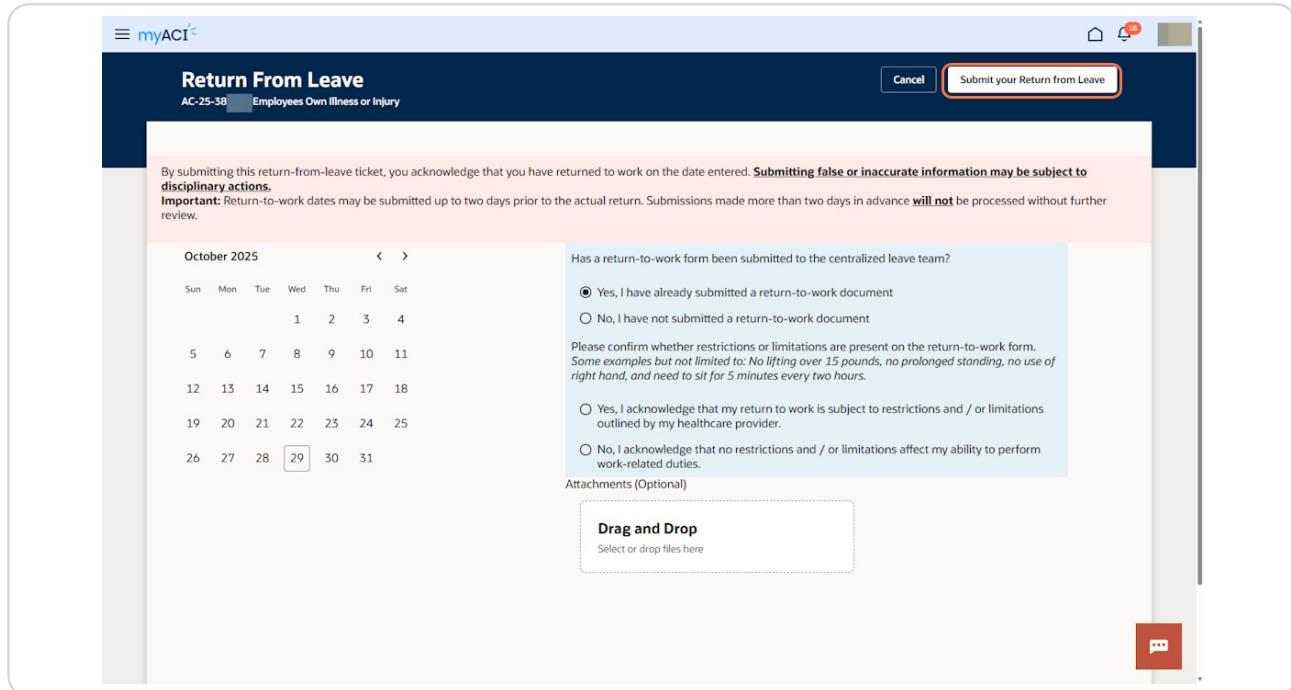
**IMPORTANT:** Wait for the document to fully upload before moving to the next step.

The screenshot shows a web-based application for 'Return From Leave'. At the top, there's a header with the myACT logo, a search bar, and a 'Submit your Return from Leave' button. The main content area has a dark blue header with 'Return From Leave' and 'Employees Own Illness or Injury' text. Below this, there's a pink warning box: '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.' and '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.' To the left is a calendar for October 2025, with the 29th highlighted. To the right, there are two questions with radio button options. The first question is 'Has a return-to-work form been submitted to the centralized leave team?' with options 'Yes, I have already submitted a return-to-work document' (selected) and 'No, I have not submitted a return-to-work document'. The second question is '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.' with options 'Yes, I acknowledge that my return to work is subject to restrictions and / or limitations outlined by my healthcare provider.' (selected) and 'No, I acknowledge that no restrictions and / or limitations affect my ability to perform work-related duties.' Below these questions is a section for 'Attachments (Optional)' with a 'Drag and Drop' area and a 'Select or drop files here' button. A red box highlights the 'Drag and Drop' area.

## 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 a web-based application for submitting a return-from-leave request. At the top, there is a header with the myACI logo and a navigation menu. The main title is 'Return From Leave' with the code 'AC-25-58' and the category 'Employees Own Illness or Injury'. On the right side of the header, there are 'Cancel' and 'Submit your Return from Leave' buttons, with the latter being highlighted by a red box. The main content area contains a calendar for October 2025, with the 29th highlighted. Below the calendar, there is a note about returning to work and a question about whether a return-to-work form has been submitted. There are two radio buttons for this question: 'Yes, I have already submitted a return-to-work document' (selected) and 'No, I have not submitted a return-to-work document'. A note below explains that return-to-work dates may be submitted up to two days prior to the actual return. There is also a section for acknowledging restrictions or limitations on the return-to-work form, with two radio buttons: 'Yes, I acknowledge that my return to work is subject to restrictions and / or limitations outlined by my healthcare provider' (selected) and 'No, I acknowledge that no restrictions and / or limitations affect my ability to perform work-related duties'. At the bottom, there is a 'Drag and Drop' area for attachments and a note to select or drop files here. A red box also highlights the 'Drag and Drop' text.

**i** 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

Print

## 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)

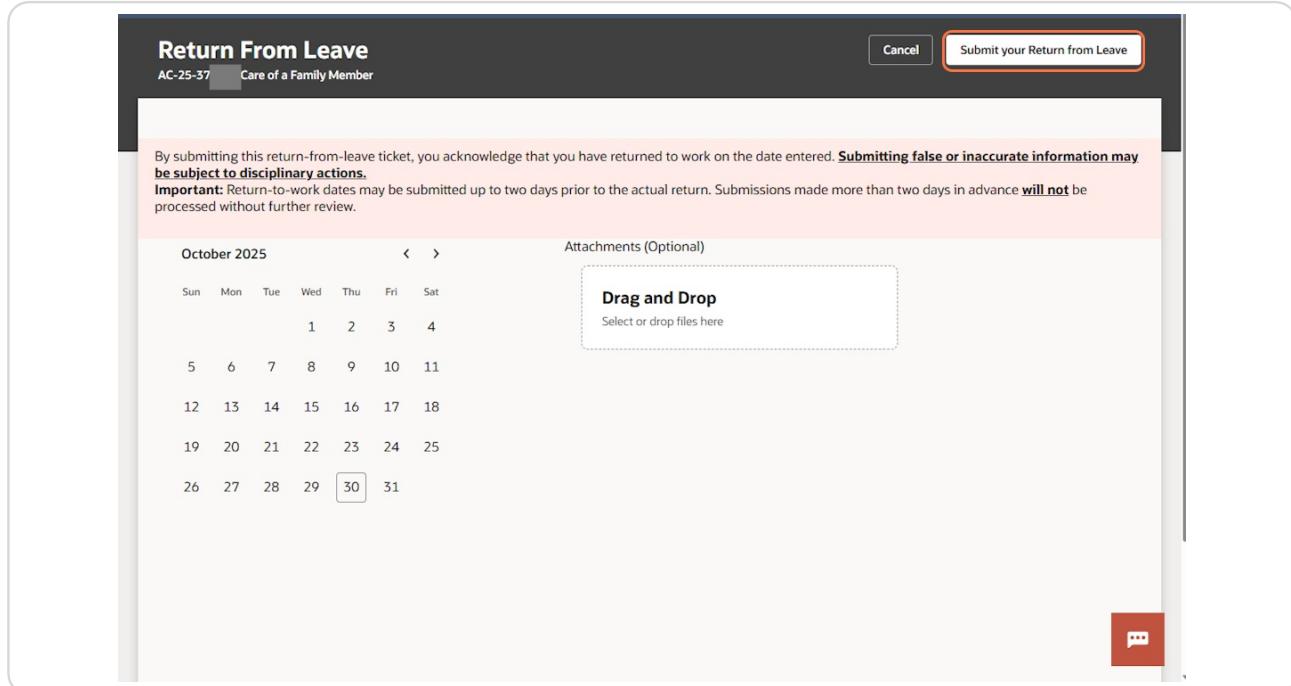
Drag and Drop  
Select or drop files here

Print

## 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.



The screenshot shows a web-based application for submitting a return-from-leave request. At the top, there is a header with the title 'Return From Leave' and a sub-header 'AC-25-37 Care of a Family Member'. On the right side of the header are two buttons: 'Cancel' and 'Submit your Return from Leave', with the latter being highlighted by a red box. Below the header, there is a note in a pink box: '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.' and '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.' To the left of the note is a calendar for October 2025, showing the days of the week and the dates 1 through 31. To the right of the calendar is a section titled 'Attachments (Optional)' with a 'Drag and Drop' area and a placeholder 'Select or drop files here'. At the bottom right of the form is a red button with a white '...' icon.



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.

**Welcome**  
To view details about your active claim, click on any claim number listed under **Your current claims**. From there, you can use **Quick Actions** to create tickets by selecting the activity you need.  
For additional information and resources about leave of absence, visit **Links and Resources** below.

**Apply for a leave of absence**  
Click to submit a new claim application for yourself.

Your role enables you to assist other associates with leave requests. Use the action below to submit any leave of absence request on behalf of an associate.

**Submit a request**  
Apply for leave, upload documents, report intermittent time off, or submit your return-to-work date.  
Click to begin

Tip: Be sure to keep your claim number handy as you'll need it throughout your leave process.

**Links and Resources**

**Leave of Absence Resources**  
Leave definitions, useful links, and...

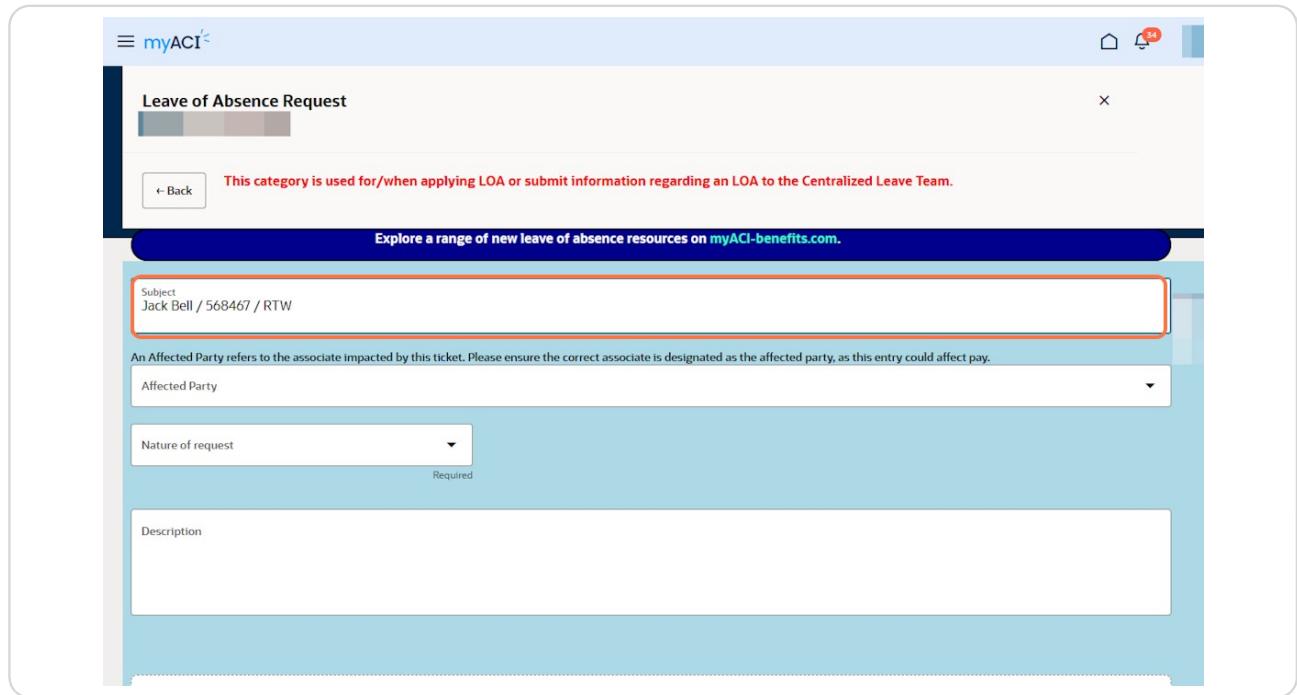
**Your current claims**

Pending	Continuous
AC-25-	Employees Own Illness or Injury Dates: claim Start 2025-09-30 to Claim End: 2025-09-30
Pending	Intermittent
AC-25-	Care of a Family Member Dates: claim Start 2025-10-20 to Claim End: 2025-10-20

## STEP 15

Enter the subject for the leave request.

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

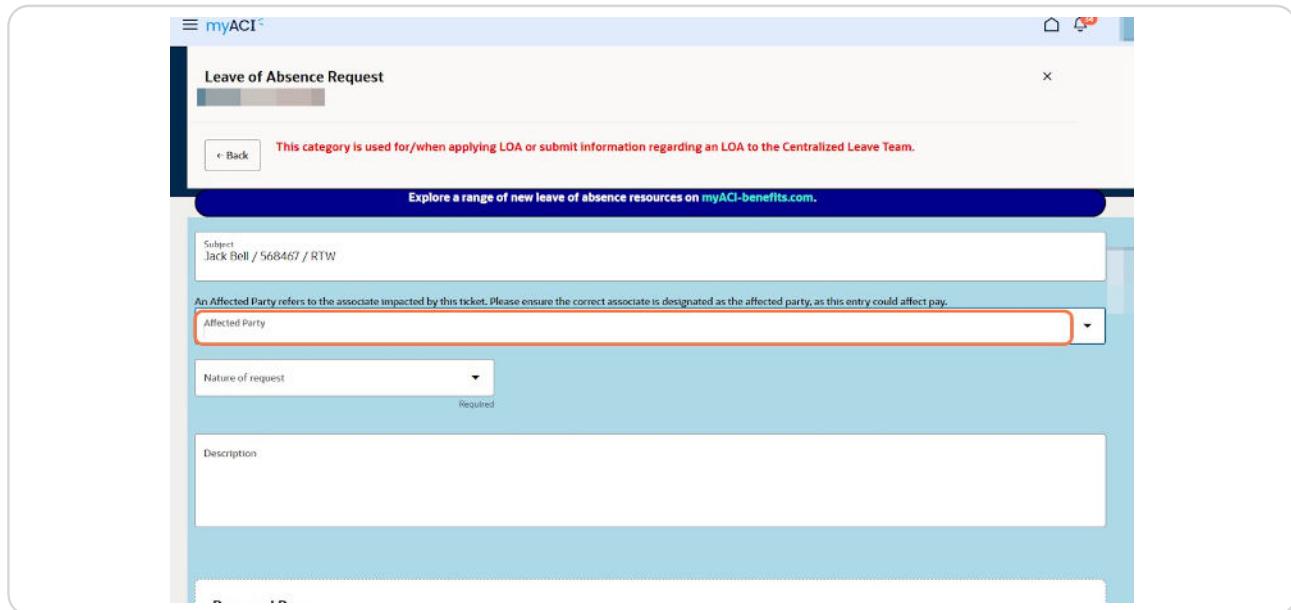


The screenshot shows a web-based application for a 'Leave of Absence Request'. The top navigation bar includes the 'myACI' logo and a 'Leave of Absence Request' section. A sub-header note states: 'This category is used for/when applying LOA or submit information regarding an LOA to the Centralized Leave Team.' Below this, a banner encourages users to 'Explore a range of new leave of absence resources on myACI-benefits.com.' The main form area contains several input fields: 'Subject' (containing 'Jack Bell / 568467 / RTW'), 'Affected Party' (a dropdown menu), 'Nature of request' (a dropdown menu marked as 'Required'), and a large 'Description' text area. The 'Subject' field is highlighted with a red border.

## STEP 16

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

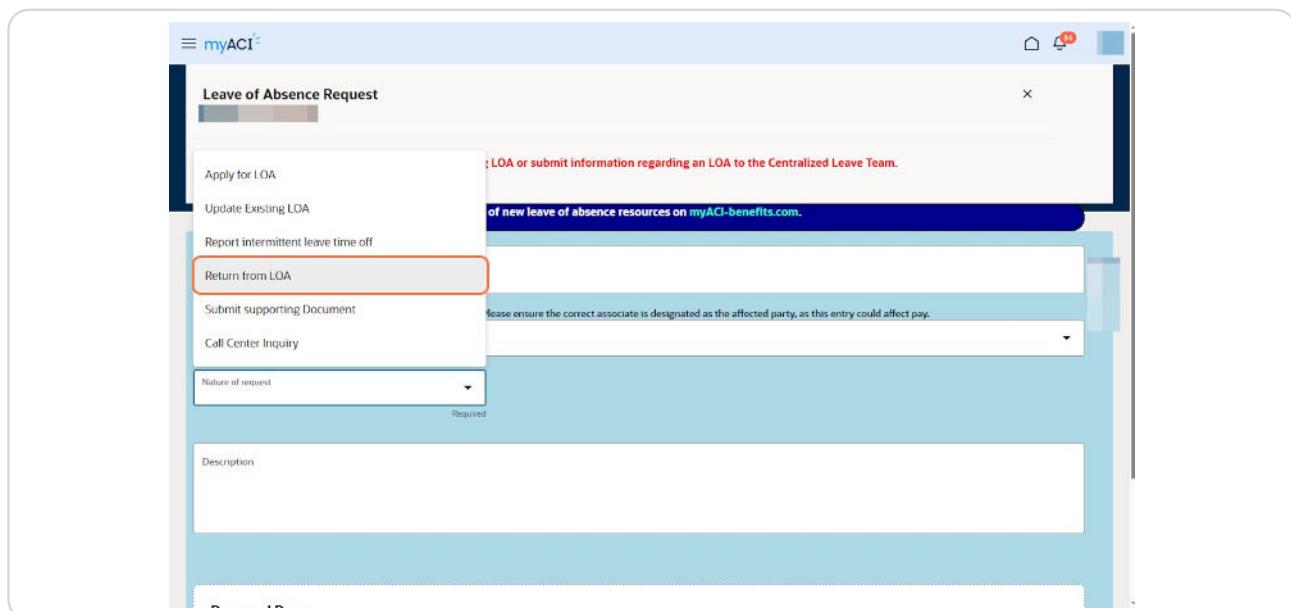
An Affected Party refers to the associate impacted by this ticket.



The screenshot shows the 'Leave of Absence Request' page in the myACI system. At the top, there is a message: 'This category is used for/when applying LOA or submit information regarding an LOA to the Centralized Leave Team.' Below this, a banner says 'Explore a range of new leave of absence resources on myACI-benefits.com.' The main form fields include 'Subject' (Jack Bell / 568467 / RTW), 'Affected Party' (highlighted with a red box), 'Nature of request' (a dropdown menu), and 'Description' (a large text area). A note at the bottom of the form states: '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.'

## STEP 17

**Select "Return from LOA" from request category.**



The screenshot shows the 'Leave of Absence Request' page in the myACI system. The 'Nature of request' dropdown menu is open, showing several options: 'Apply for LOA', 'Update Existing LOA', 'Report intermittent leave time off', 'Return from LOA' (highlighted with a red box), 'Submit supporting Document', and 'Call Center Inquiry'. The rest of the page is identical to the previous screenshot, including the banner and the note about the affected party.

## 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.

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

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

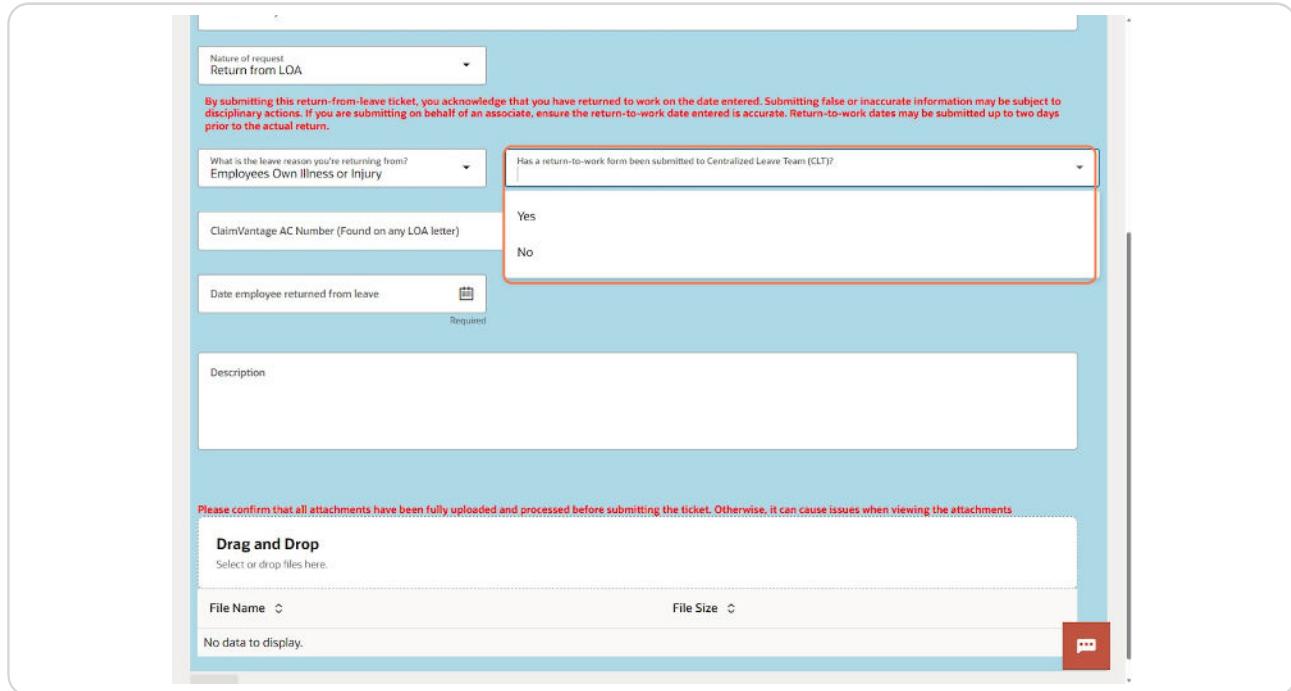
**i** Employee Own Illness/Injury Steps 19 - 25.

## 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-based form for returning from leave. At the top, a dropdown menu is set to "Return from LOA". A note below it 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." The next section asks "What is the leave reason you're returning from?" with "Employees Own Illness or Injury" selected. A "ClaimVantage AC Number (Found on any LOA letter)" field is present. A "Date employee returned from leave" field with a calendar icon and a "Required" label is shown. The main question is "Has a return-to-work form been submitted to Centralized Leave Team (CLT)?", with "Yes" and "No" options. The "Yes" option is selected and highlighted with a red box. A large text area for "Description" is below. At the bottom, a note says: "Please confirm that all attachments have been fully uploaded and processed before submitting the ticket. Otherwise, it can cause issues when viewing the attachments." A "Drag and Drop" section with "Select or drop files here." is shown, followed by a table for "File Name" and "File Size" with a "No data to display." message. A red "Submit" button is at the bottom right.

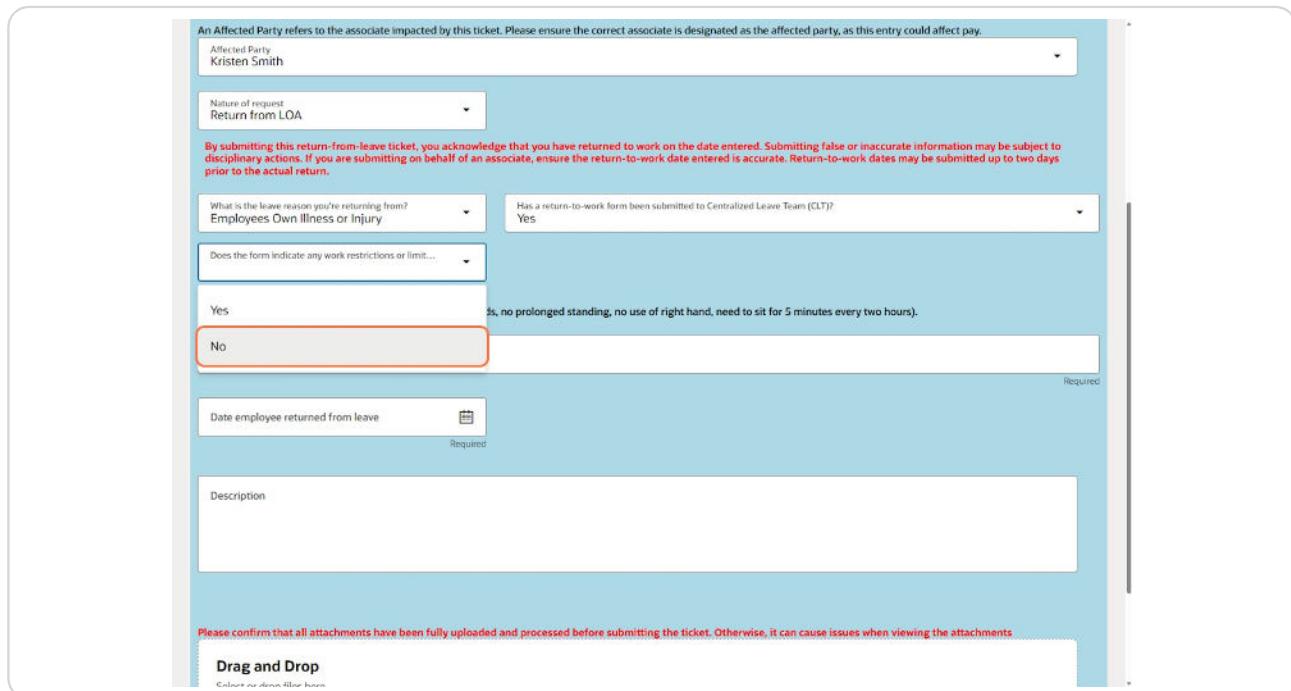
## STEP 20

**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.

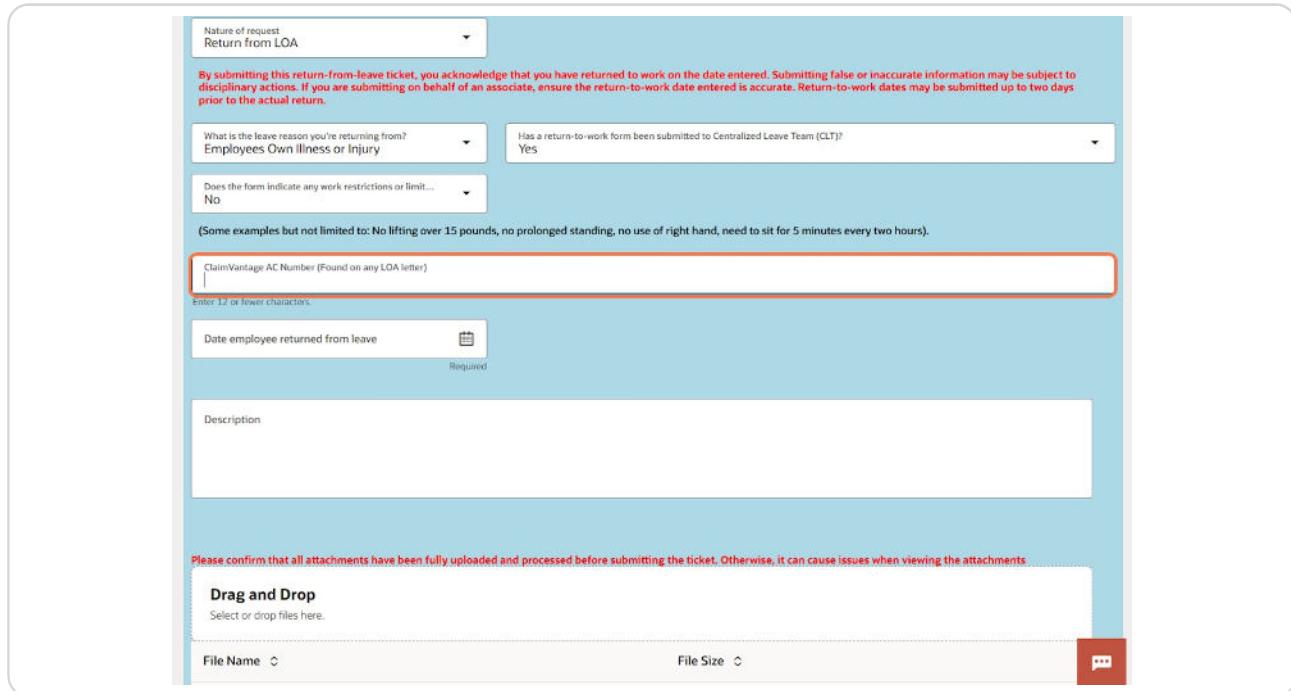
Drag and Drop (Or click here to browse)

## 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.



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).

ClaimVantage AC Number (Found on any LOA letter)

Enter 12 or fewer characters.

Date employee returned from leave

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

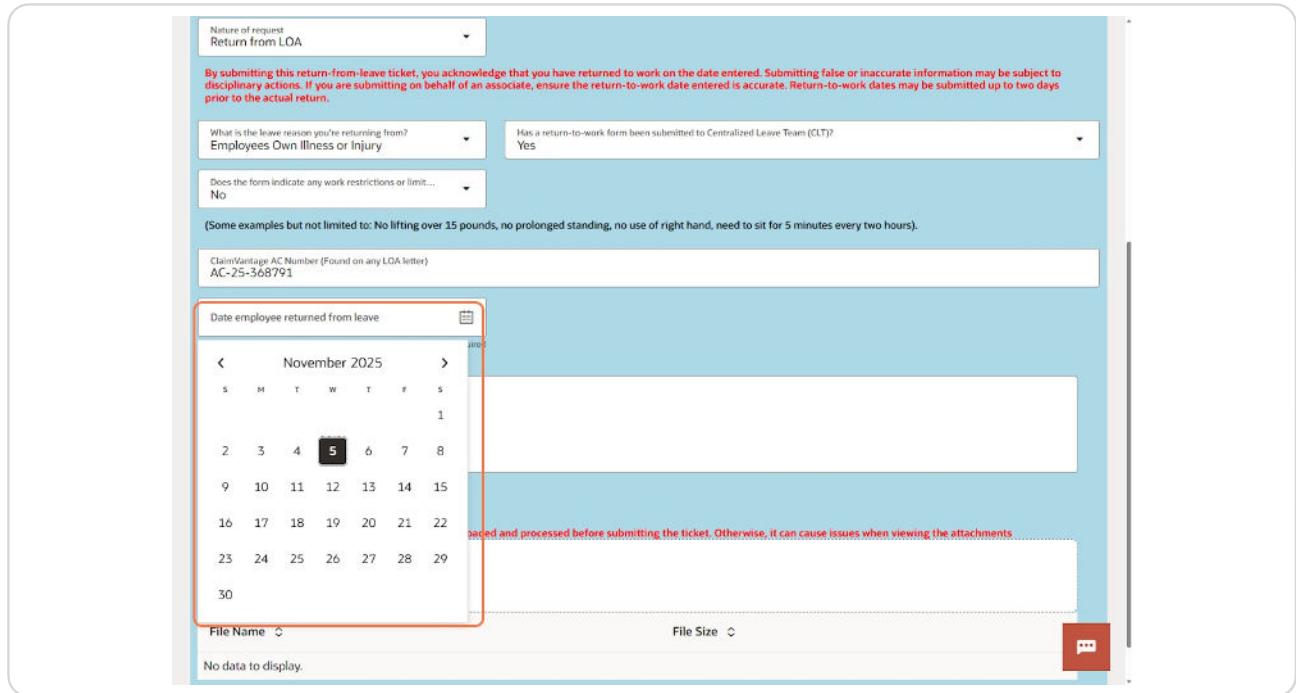
File Size

Submit

## STEP 22

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

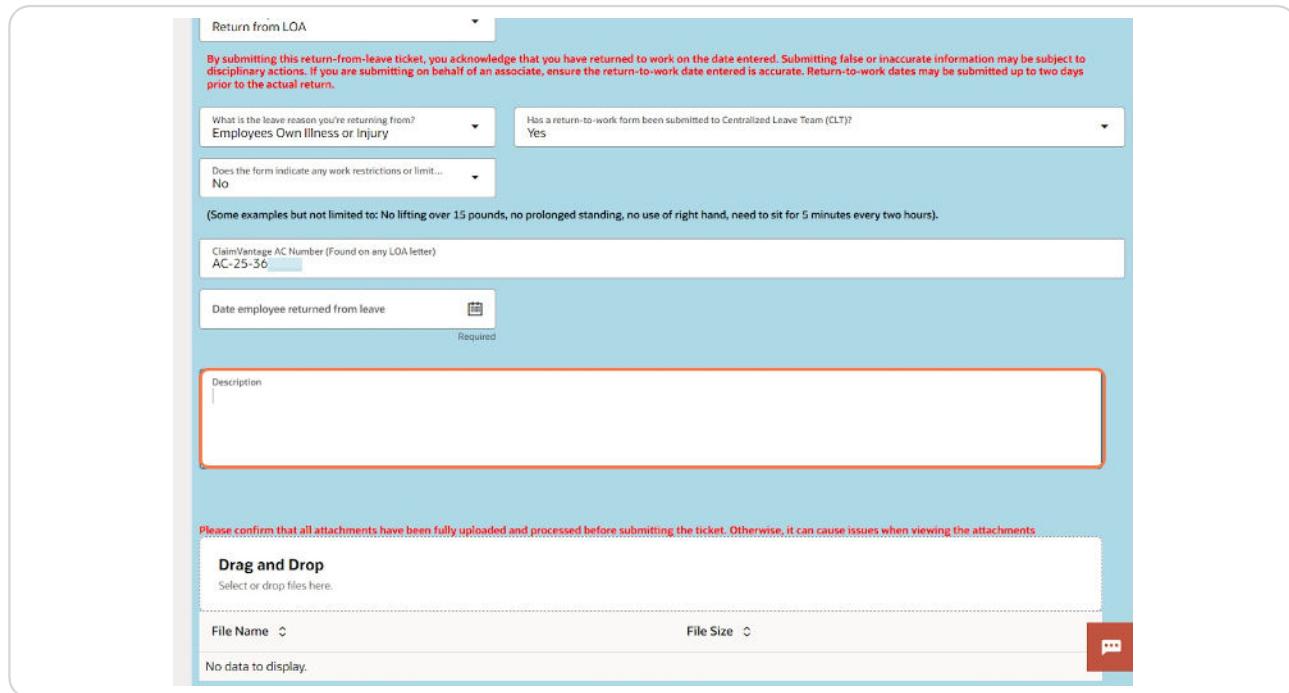
**NOTE:** By submitting this return-from-leave ticket, you acknowledge that you have returned to work on the date entered. Submitting false or inaccurate information may be subject to disciplinary actions.



The screenshot shows a web-based form for a return-to-work ticket. At the top, a dropdown menu is set to "Return from LOA". Below it is a 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. 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." There are three dropdowns: "What is the leave reason you're returning from?" (set to "Employees Own Illness or Injury"), "Has a return-to-work form been submitted to Centralized Leave Team (CLT)?", and "Does the form indicate any work restrictions or limit...". The last dropdown is set to "No". A note below says "(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)." A text input field shows "ClaimVantage AC Number (Found on any LOA letter)" with "AC-25-368791" entered. A large red box highlights a date selection calendar for November 2025. The calendar shows the days of the week (S, M, T, W, T, F, S) and the dates from 1 to 30. The 5th of November is highlighted with a black box. A note below the calendar says "Please upload files in PDF format. PDF files must be converted to a single page and processed before submitting the ticket. Otherwise, it can cause issues when viewing the attachments." At the bottom, there are "File Name" and "File Size" fields, both currently empty. A red "Submit" button is visible on the right.

## 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).

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

Date employee returned from leave

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 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.

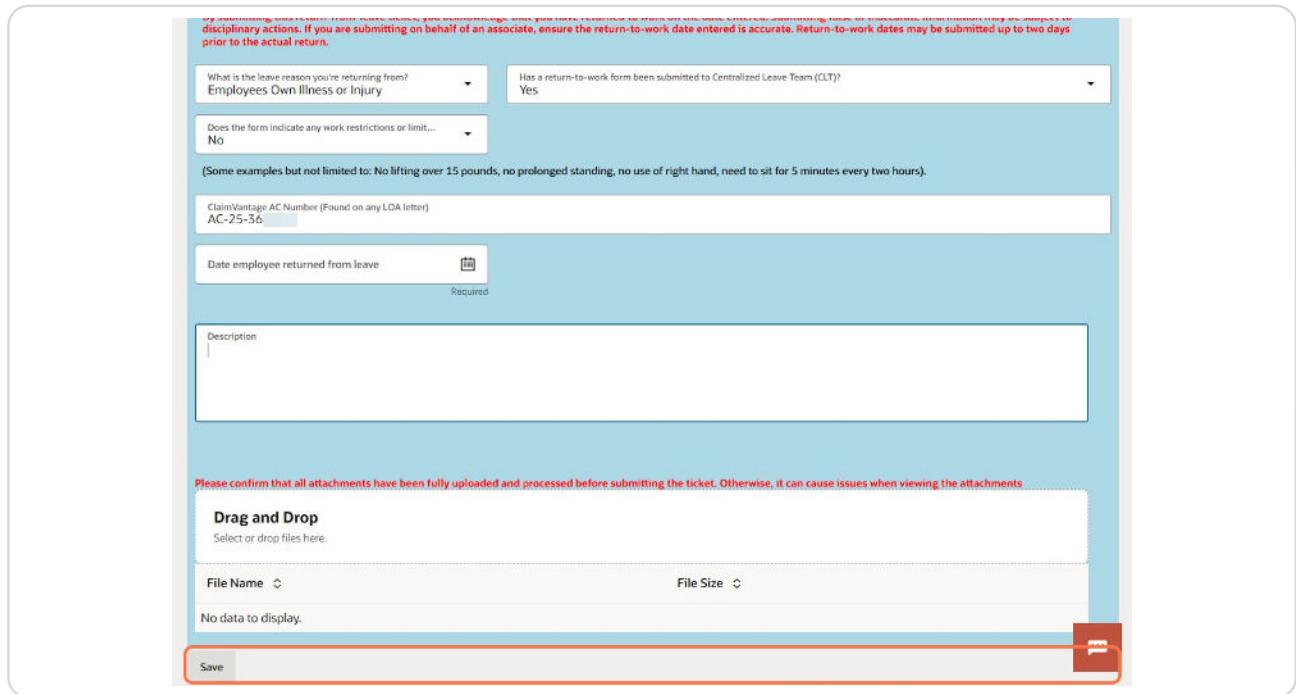
The screenshot shows a web-based form titled "Return from LOA". At the top, a note states: "By submitting this return-from-leave ticket, you acknowledge that you have returned to work on the date entered. Submitting false or inaccurate information may be subject to disciplinary actions. If you are submitting 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." The form includes the following fields:

- "What is the leave reason you're returning from?" dropdown: "Employees Own Illness or Injury"
- "Has a return-to-work form been submitted to Centralized Leave Team (CLT)??" dropdown: "Yes"
- "Does the form indicate any work restrictions or limit..." dropdown: "No"
- Text area: "(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/Entitlement AC Number (Found on any LOA letter):" input field: "AC-25-36"
- "Date employee returned from leave" date picker field
- "Description" text area
- Text at the bottom: "Please confirm that all attachments have been fully uploaded and processed before submitting the ticket. Otherwise, it can cause issues when viewing the attachments."
- A "Drag and Drop" section with the instruction "Select or drop files here." and a "File Name" and "File Size" table.
- Table data: "File Name" and "File Size" both show "No data to display." and a red "..." button.

## 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.



By submitting this return from leave request, you acknowledge that you have returned to work and that any information you are providing is accurate. 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

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** 



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](#).

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.

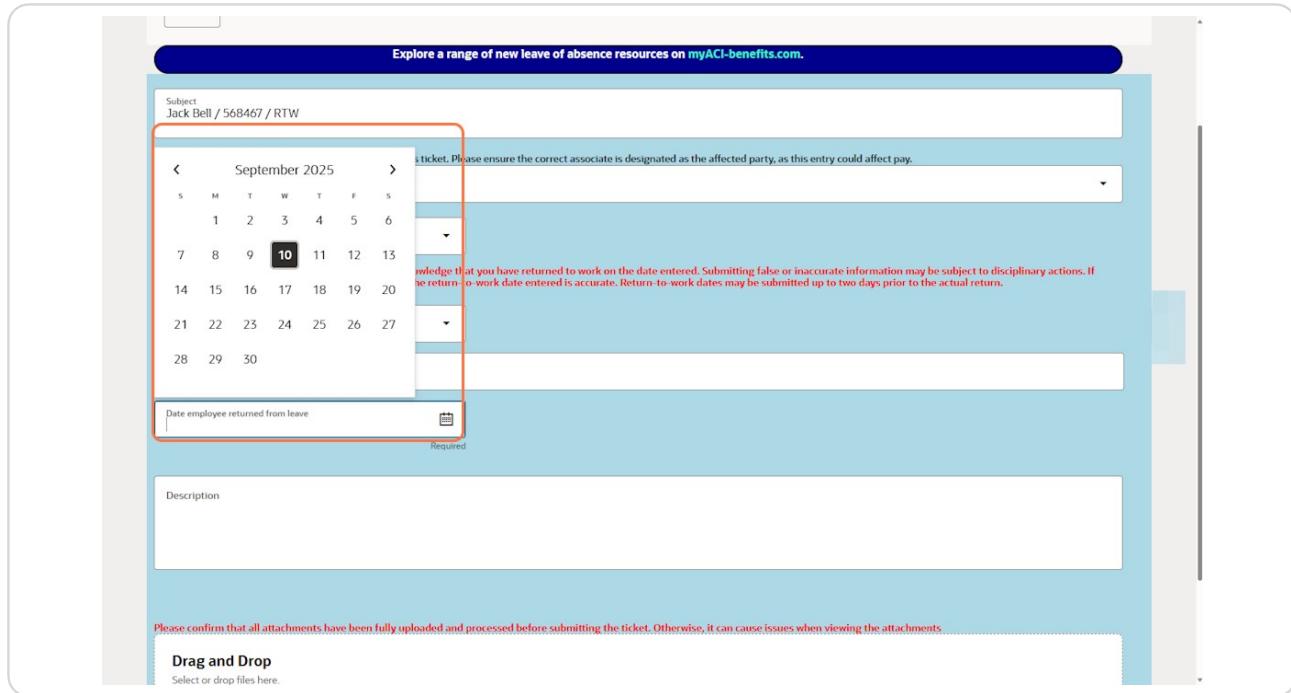
Date employee returned from leave

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.



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

You acknowledge that you have returned to work on the date entered. Submitting false or inaccurate information may be subject to disciplinary actions. If the return-to-work date entered is accurate, Return-to-work dates may be submitted up to two days prior to the actual return.

Date employee returned from leave

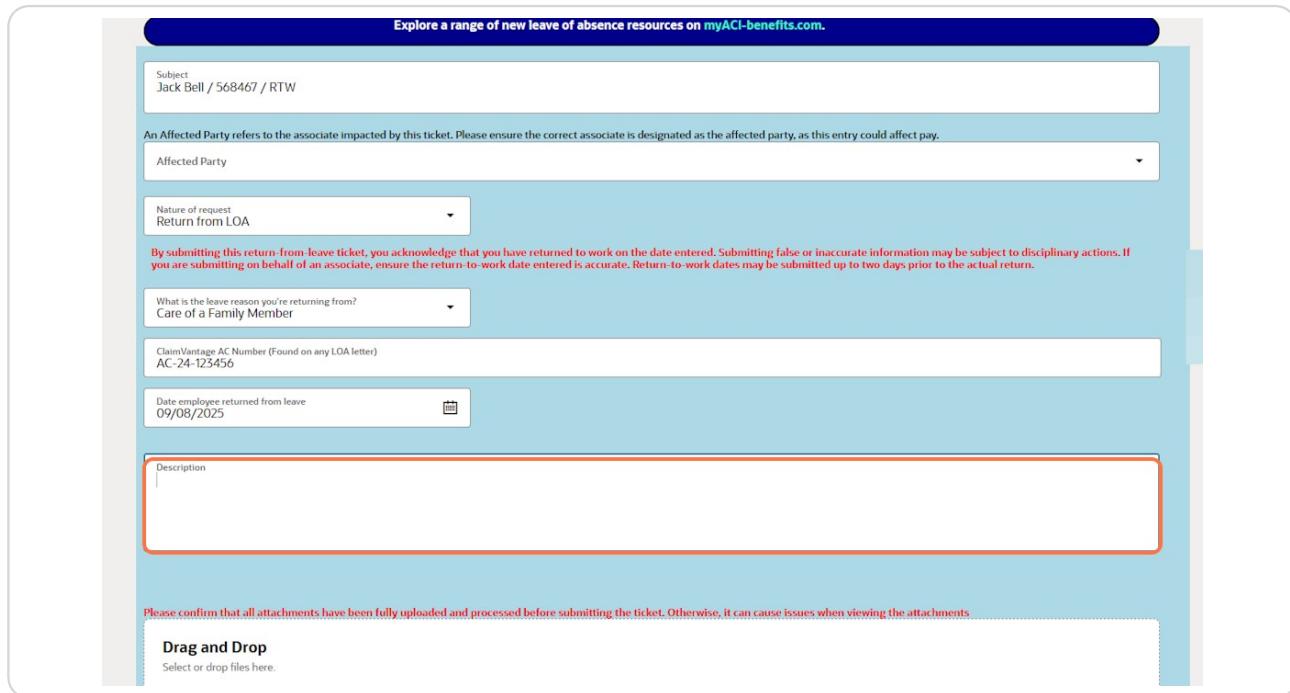
Description

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.**

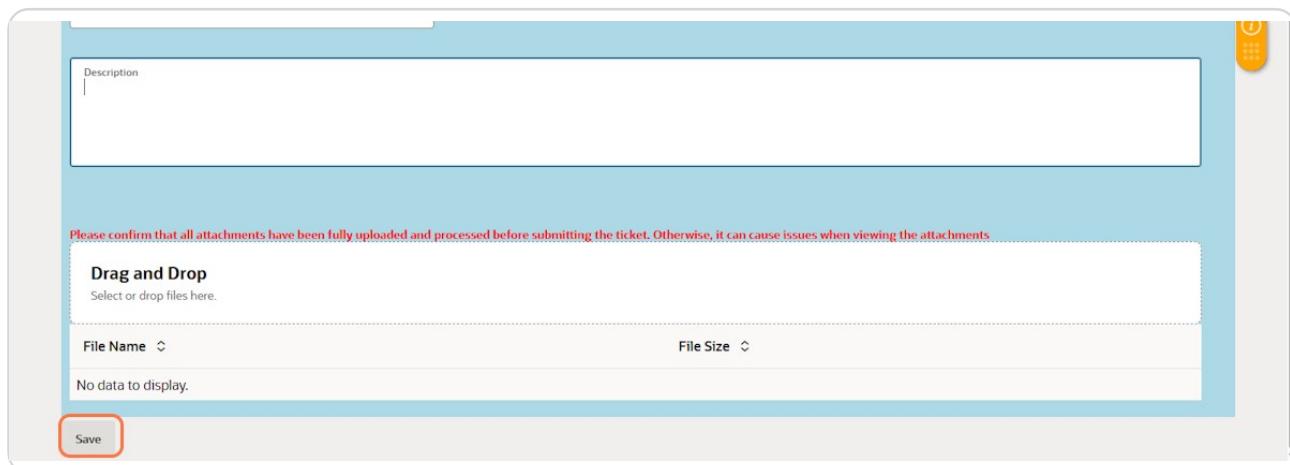


The screenshot shows a web-based leave request form. At the top, a banner reads "Explore a range of new leave of absence resources on myACI-benefits.com." Below this, the "Subject" field contains "Jack Bell / 568467 / RTW". A note states, "An Affected Party refers to the associate impacted by this ticket. Please ensure the correct associate is designated as the affected party, as this entry could affect pay." The "Affected Party" dropdown is set to "Affected Party". The "Nature of request" dropdown is set to "Return from LOA". A note below says, "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 "What is the leave reason you're returning from?" dropdown is set to "Care of a Family Member". The "ClaimVantage AC Number (Found on any LOA letter)" field contains "AC-24-123456". The "Date employee returned from leave" field shows "09/08/2025". The "Description" field is highlighted with a red box. A note at the bottom says, "Please confirm that all attachments have been fully uploaded and processed before submitting the ticket. Otherwise, it can cause issues when viewing the attachments." A "Drag and Drop" section with the sub-instruction "Select or drop files here." is also present.

## 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.



The screenshot shows the same leave request form as the previous step, but with a focus on the bottom left corner. The "Save" button is highlighted with a red box. The rest of the form is identical to the previous screenshot, including the "Description" field, the note about attachments, the "Drag and Drop" section, and the "File Name" and "File Size" fields.