

Request for New York Paid Family Leave

Bonding Certification (*MET-PFL-2*).



The employee requesting PFL must complete all applicable requested information.

Name of employee requesting PFL

First name	Middle initial	Last name	PFL claim number
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SECTION 1: Bonding certification *(to be completed by the employee)*

1. Child's Date of birth <i>(mm/dd/yyyy)</i>	2. Child's gender <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Not designated/Other
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3. Does the child live with the employee requesting PFL? Yes No

4. Child is employee's:

- Biological child Stepchild Foster child Adopted child Legal ward
 Spouse/domestic partner's child

5. Select one of the following and attach a copy of the document required as evidence of the relationship.

Parent of newborn infant:

Birth mother:

- Health care provider certification of pregnancy *(include expected due date AND mother's name)*; OR
 Health care provider certification of birth *(include date of birth of infant AND mother's name)*; OR
 Child's birth certificate

Other parent:

- Voluntary acknowledgment of paternity; OR
 Copy of birth certificate naming second parent; OR
 Court order of filiation; OR
 Birth mother documents (see above) PLUS one of the following:
 Marriage certificate; OR
 Certificate of civil union; OR
 Certificate of domestic partnership
 OR; Other documentation of parental relationship

Foster parent:

- Letter of foster care placement or anticipated placement issued by county or city department of Social Services or authorized voluntary foster care agency

Date of foster care or adoption placement if applicable *(mm/dd/yyyy)* _____

Adoptive parent: Court document finalizing adoption Documentation in furtherance of adoption

Name of employee requesting PFL

First name	Middle initial	Last name	PFL claim number
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SECTION 2: Declaration and signature

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.

I am hereby making a request for Paid Family Leave benefits under the NYS Workers' Compensation Law. My signature affirms that the information I am providing is true and accurate to the best of my knowledge and belief.

Sign Here	Signature of Employee	Date (mm/dd/yyyy)
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Request for Paid Family Leave: Bonding Certification (MET-PFL-2) form instructions

If the employee is requesting PFL to bond with a newborn, a newly adopted child or a foster child, the employee must submit the Bonding Certification (MET-PFL-2) with the Request For Paid Family Leave (MET-PFL-1).

Employee enters name and claim number (*if available*) at the top of each page in the fields provided.

Questions 1-4: Enter the child's information, and indicate the child's relationship to the employee.

If the form is submitted to MetLife prior to the birth of a child, this is considered pre-submitting. The employee is then required to contact MetLife and provide the required documentation of the child's birth. MetLife will advise the employee how and when to provide the required additional documentation.

There may be instances where PFL can be taken before the adoption is finalized. For example, the employee may be required to appear in court or travel to another country as part of the adoption process. The employee should include documentation to show that the PFL is necessary to further the adoption.

Question 5: See chart below for documentation details. Unless specified, do not send the original documents.

Bonding Form/Certification	Description
Health care provider certification of pregnancy	An original letter obtained from the birth mother's health care provider that certifies pregnancy. It should include the mother's name and the expected due date.
Health care provider certification of birth	An original letter obtained from the birth mother's health care provider that includes the mother's name and child's date of birth.
Birth Certificate	A copy of the certificate issued by the city or county office in which the infant is born.
Voluntary Acknowledgment of Paternity (Form LDSS-4418)	A copy of the form that establishes legal fatherhood when the parents are unmarried. Completed by both mother and father. For more information, see childsupport.ny.gov/dcse/aop_howto.html
Court Order of Filiation	A copy of the order from the family court that names the father of a child. Establishes legal fatherhood when the parents are unmarried. Completed by both mother and father. For more information, visit childsupport.ny.gov/dcse/aop_howto.html
Marriage Certificate	A copy of the official statement issued by the town or city clerk from which the marriage certificate was issued.
Civil union/domestic partner's documentation	A copy of the certificate of civil union or domestic partnership.
Foster care placement letter	A copy of the letter of foster care placement issued by the county or city department of social services or authorized voluntary foster care agency.
Court documents of adoption	A copy of the court document finalizing adoption or documentation in furtherance or court order finalizing adoption.
Other documentation	Other documentation of parental relationship may be accepted if none of the others listed apply.