

## PENN NURSING MOTHER'S PLAN DOCUMENT

It's the policy and philosophy of the University of Pennsylvania to encourage a family friendly environment and to support women's efforts to provide their children with breast milk. Penn's Nursing Mothers Program is designed to provide guidance to schools, centers, supervisors, and nursing mothers for managing lactation needs in the workplace. To help ensure that campus needs are being met, Human Resources is collecting the following information from all faculty and staff members managing lactation responsibilities in the workplace.

Please send this completed document to the Human Resources representative for your school or center as soon as possible before returning to work. If you're not sure who this person is, check with your business administrator. If you wish to provide additional feedback, please send any comments or questions to Human Resources at [gowl@hr.upenn.edu](mailto:gowl@hr.upenn.edu) or call 215-898-0380.

My job at Penn:    Faculty Member    Weekly-Paid Staff Member    Monthly-Paid Staff Member

Regarding space for lactation responsibilities (please check which situation applies):

- I will use my personal office space.
- I will use space that has been set aside by my organization for this purpose.
- I will need assistance finding space for this purpose.

Your name:	Your email address:
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Your school/center and intramural work address:	Your department:
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Your projected return to work date:

Your signature:	Date signed:
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**This Section for Staff Members Only—Please work out the following plan with your supervisor.**

The following protocol will be followed when I stop working and/or step away from the workspace for lactation responsibilities:

<b>If central organizational space will be used:</b>	Since personal office space is not available, the following alternate space will be used:		
	Instructions for reserving alternate lactation space:		
	<i>Name, title, and contact information for the person who identified the above space for use:</i>	Name:	Phone:
		Title:	Email:

Supervisor's signature:	Date signed:
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