



Emergency Paid Sick Leave Request Form for Covid-19

Effective for requests made thru December 31, 2020

The Families First Coronavirus Response Act ("Act"), enacted on March 18, 2020, provides employees with access to emergency paid sick leave ("EPSL") for certain leave requests related to the COVID-19 pandemic. As of April 1, 2020, EPSL is available for immediate use by qualifying employees. Full-time employees are eligible for up to 80 hours of EPSL. Part-time employees are eligible for EPSL based on their posted two-week schedule or if no schedule is posted, an amount equal to the number of hours the employee works, on average, over a four-week period (last two paychecks). All paid leave under the Act is subject to the provisions outlined below. Employees should contact their supervisors or human resources departments with any questions.

Date: _____

Name: _____

Department: _____

Start Date: _____ End Date: _____

I would like to request EPSL for the following reason(s) (check all that apply)

- (1) I am subject to a Federal, State, or Local quarantine or isolation order related to COVID-19
- (2) I have been advised by a health care provider to self-quarantine because of COVID – 19.
- (3) I am experiencing symptoms of COVID – 19 and am seeking a medical diagnosis.
- (4) I am caring for an individual who is subject to a Federal, State, or Local quarantine or isolation order related to COVID-19 or who has been advised by a health care provider to self-quarantine due to concerns related to COVID – 19.
- (5) I am caring for my son or daughter because my child’s school or place of care has been closed, or the child care provider or my child is unavailable, due to COVID -19 precautions.
- (6) I am experiencing any other substantially similar condition specified by the Secretary of Health and Human Services in consultation with the Secretary of the Treasury and the Secretary of Labor.

Employee Signature: _____

Date: _____

(Office Use Only)

Managers Signature and date for approval: _____

Date: _____

Compensation Provisions

The employee will be compensated for EPSL for reason (1), (2), or (3) (*over a 2-week period*). Full-time employees taking leave are entitled to pay at either their regular rate or the applicable minimum wage, whichever is higher, up to \$511 per day or \$5,110 (over a two-week period). Part-time employees are eligible for EPSL based on their posted two-week schedule or if no schedule is posted, an amount equal to the number of hours the employee works, on average, over a four-week period (last two paychecks).

The employee will be compensated for EPSL for reason (4) or (6) (*over a 2-week period*). Full-time and Part-time employees taking leave are entitled to pay at 2/3 their regular rate or 2/3 the applicable minimum wage based on the posted two-week schedule or if no schedule is posted, an amount equal to the number of hours the employee works, on average, over a four –week period (last two paychecks).

The employee will be compensated for EPSL for reason (5) (*over a 12-week period*). Full-time and Part-time employees taking leave are entitled to pay at 2/3 their regular rate or 2/3 the applicable minimum wage based on the posted two-week schedule or if no schedule is posted, an amount equal to the number of hours the employee works, on average, over a four –week period (last two paychecks).