

Documentation of Paid Leave Taken
(Use separate payroll code where possible)
Maintain this Documentation for at least 4 years

Employee Name:	Department/Job Title:
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Divide the Total Wages in Six Months Prior to Taking Leave by the Hours worked in the same Period to Obtain Regular Rate Regular Rate= \$
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Enter the employee's Regularly Scheduled Weekly Hours . Scheduled Hrs= _____ Hrs
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Reason for Leave (See definitions below) : A B C D E

Emergency Paid Sick Leave

Week	Enter Reason for Leave Code	Paid Sick Leave Hours Used (Maximum of 80hrs total)	Paid at 100% or 67%	Gross Pay for Week (Not to Exceed \$511/Day if for reasons A, B or C or \$200/day if for D or E)
Week One Dates				
Week Two Dates				
Total Hours Paid----->>>				

If used intermittently or over more than 2 calendar weeks,, attach schedule of hours scheduled and hours worked

Reasons for Leave

- A. Employee is subject to a federal, state, or local quarantine or isolation order related to COVID-19.**
- B. Employee has been advised by a health care provider to self-quarantine due to concerns related to COVID-19.**
- C. Employee is experiencing symptoms of COVID-19 and is actively seeking a medical diagnosis.**
- D. Employee is caring for an individual who is subject to either number A or B above.**
- E. Employee is caring for a child whose primary or secondary school or place of care has been closed, or my childcare provider is unavailable due to COVID-19 precautions**

SEE BACK FOR ENHANCED FMLA DOCUMENTATION

Enhanced FMLA

Enhanced FMLA may only be used when an employee is caring for a child whose primary or secondary school or place of care has been closed, or a regular childcare provider is unavailable due to COVID-19 precautions and no other caregiver is available.

Week	Paid FMLA Hours Used	Scheduled Hours From Above	Divide Hrs Taken by Scheduled Hours and enter Percentage here	EFMLA Wages FMLA Hrs used times Regular Rate x 67%
One				First two weeks are Unpaid but employee may use EPSL or other paid leave
Two				
Three				
Four				
Five				
Six				
Seven				
Eight				
Nine				
Ten				
Eleven				
Twelve				

If used intermittently or over more than 12 calendar weeks, attach schedule of hours scheduled and hours worked

Attach Copies of IRS Form 7200 and Form 941 used to receive tax credit