

## Family First Expanded FMLA & Sick Leave Forms and Letters (with CFRA as applicable)

Form #	Form/Letter Name	Description
OVGECA3002	Leave of Absence / Sick Leave Request Form	Use this form for the employee to indicate type of Leave needed
OVCA3002	Family First FMLA Amended Certification	Use this form for the certification for Family First FMLA leaves.
OVCA3008	Family First Sick Leave Certification	Use this form to confirm the need for Family First Sick Leave
OVCA3003	Certification of Health Care Provider for Employee Return to Work	Use this form to confirm ability to Return To Work (RTW) with or without Accommodation & Symptom Free

OVCA3101	Family First FMLA Eligibility-Conditional Designation Letter	Use this form to notify of eligibility and conditionally grant Family First FMLA leave when an employee has been absent for 3 or more days, or has informed you of the need for Family First FMLA leave due to a qualifying event, but has not provided enough information on the certificate confirming the need for leave is a qualifying Family First FMLA event.
OVCA3102	Family First FMLA Designation Conditional Letter Second Request Letter	Use this form to provide the employee a second opportunity to provide information confirming the need for a qualifying Family First FMLA leave. This letter will continue the conditional Family First FMLA designation if the employee did not respond to the first request for certification.
OVCA3103	FMLA Designation Letter	Use this form to designate leave for Family First FMLA after receiving certification indicating the need for leave qualifies as Family First FMLA.
OVCA3214	FMLA Non Eligible - Denial Notification Letter	Use this form to inform employees they are not eligible for FMLA and deny the Family First FMLA leave request.