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**Family First Sick Leave Certification (OVCA3008)– Training Narrative
(OVCA3008)**

Purpose: Use to formally document employee sick leave requests with Family First qualify leaves and other company leaves.

After you have downloaded the form from our webpage, save it to your computer.

We recommend grouping the letters/forms by leave type, and then have separate folders for the letters and forms. You may want to organize it like our Table of Contents so you can cross-reference our list with your folders to easily determine what letters you have or do not have.

Once the document is saved, open it so you can create your company template by updating all the **blue highlights within the document.**

- Update the header with your organization’s business name.
- The Family First Sick does NOT run concurrently with any other sick leave, including city, state or your own companies sick leave – PTO policies.
- This is a very comprehensive benefit for the employee to use for any type of leave related the COVID-19 challenges we are currently facing. However, they still need to verify in writing why they are taking the leave.
- The form lists the various reason the employee will qualify for the leave. The 80 hours is designed to assure the employee will be paid during the Family First 2 week waiting period for FMLA, as well for non-qualifying Family First
- NOTE: If the employee does not work full time this is a pro-rated leave to provide two weeks of the employees’ “normal work weeks” of leave. So, if the employee works 30 hours a week the full benefit would be 60 hours NOT 80. Be sure to explain this in detail to the employee.
- Once the employee has determined why the need the leave in number 2, the next concern is will they have a medical provider confirm their need for leave, if the leave if for:
 - Advised to by health care provider to self-quarantine
 - Experiencing symptoms
 - Caring for individual subject to criteria in #1 or #2 above



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- Experiencing similar condition as specified by the Secretary of HHS

IF the leave is for one of the reasons above we would expect the employee to provide a medical providers confirmation by requesting they sign this document. If, however, as indicated by the CDC, it may be difficult to obtain medical treatment then we want the employee to confirm they attempted to obtain medical feedback but were unable to.

- Upon receipt of the completed LOA request the employer should send the COV3102 Family First FMLA Conditional Designation Letter with the OVCA3002 FMLA Family First School / Childcare Closure Leave Certification if the leave is for #5 qualifying reason. If the need for leave is for an employee's own serious health condition related to COVID-19 or other medical condition or to take care of a FMLA qualifying family member, the standard FMLA/CFRA Conditional Designation Eligibility Notice should be sent.
- In the event the employee is requesting a reduced work or intermittent leave schedule, remember it is not required that the employer provide this opportunity. Be careful to create an objective method of determining if this type of leave will be provided.
- The bottom section of the form requires the employee to sign they are representing they were unable to see a medical provider.
- Employee must sign the form.

NOTE to HR:

- In your procedure manual, you should also indicate what the standard operating procedure is for processing these forms. Your employees and supervisors should have a very clear understanding of how long it takes for these forms to get processed so the employee cannot say there was a delay in their processing that affected their leave – specifically FMLA and ADA or any other state or federally protected medical leaves.
- **REMEMBER:** Under FMLA you have 5 business days to notify the employee that they are eligible or not eligible for the requested FMLA Sick Leave, so



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that would be April 8, 2020, for any employees currently on leave due to any of the reasons listed is #3 on the form.

You have successfully completed your template!