PHYSICIAN'S STATEMENT FOR ABSENCE DUE TO MEDICAL REASONS

TO BE COMPLETED BY MD/NP/PA ONLY

Send completed form to: Health Services, 725 Harrison St., Syracuse, NY 13210, email to healthservices@scsd.us or fax to 315-435-4859

If you have any questions, contact Health Services at 315-435-4145

To be completed by employee:

Name: _____ Employee ID # _____

FIRST M.I LAST

School or Location: _____ Job Title: _____

Cell Phone: _____ Home Phone: _____

Is this related to a Workers' Compensation Claim: ☐ NO ☐ YES Claim # _____

If this is Maternity Related: Estimated Due Date: _____

*If you plan on staying out of work past your medical clearance date, (6-8 weeks), you must submit your **Return to Work note PRIOR** to taking your childcare/extended leave.*

Estimated return date from childcare/extended leave: _____

Authorization for Disclosure of Health Information: I hereby authorize, the physician listed below to disclose health information to the Medical Director of SCSD.

_____ _____

Employee Signature **Date**

To be completed by physician's office:

Date Absence to Begin/Began: _____ Estimated Return to Work Date ***(Required)***: _____

Diagnosis ***(Required)***: _____

_____

_____ _____

Physician's Stamped Name Physician's Signature

_____ _____

Physician's Address Physician's Phone Number

To be completed by SCSD Health Services Director:

Approved: ☐ YES ☐ NO

_____ _____

Signature of Health Services Director Date

It is the policy of the Syracuse City School District to grant sick leave benefits during periods of maternity or personal illness disability in an amount equal to, but not exceeding, unused accumulated sick leave for the period of actual physical disability and not for any additional time off which is a matter of convenience or family or personal preference. The District reserves the right to evaluate the recommendations and conclusions of an employee's private physician, and also has the sole and exclusive discretion to determine the legitimacy of each claim processed.

The Board of Education, it officers and employees, shall not discriminate against any student, employee, or applicant on the basis of race, color, national origin, Native American ancestry/ethnicity, creed, religion, marital status, sex, age, or disability.