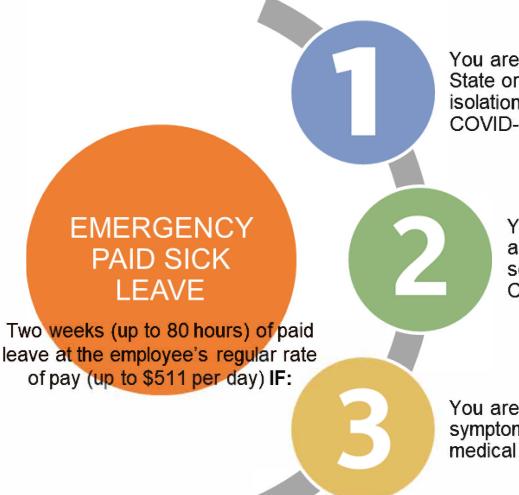


What kind of leave is available under the Families First Coronavirus Response Act (FFCRA) ?



You are subject to a Federal, State or local quarantine or isolation order related to COVID-19

> You have been advised by a health care provider to self-quarantine related to COVID-19

You are experiencing COVID-19 symptoms and are seeking a medical diagnosis

If one of these applies to you, you need to:

- 1. Complete the application found at <a href="https://www.fortdodgeiowa.org/egov/documents/1585793029\_65356.pdf">https://www.fortdodgeiowa.org/egov/documents/1585793029\_65356.pdf</a>
- 2. Attach the Federal, State or local isolation order or appropriate documentation from your health care provider.
- 3. Turn these documents in to Human Resources.

What's next? If Human Resources has all the required documentation, you will take two weeks of **consecutive time off** under Emergency Paid Sick Leave. Please make sure your time sheet includes any regular time or other paid time off used during the applicable pay periods.

If you are able to telecommute, you may not qualify for this leave.

If these reasons do <u>not</u> apply to you, continue to page 2.

You are caring for a family member 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

## EMERGENCY PAID SICK LEAVE

Two weeks (up to 80 hours) of naid leave at 2/3 of the employee's regular rate of pay (up to \$200 per day) IF: You are caring for a family member if the family member's school or place of care is closed, or the care provider is unavailable, because of COVID-19\*

You are experiencing another substantially similar condition specified by the Secretary of Health and Human Services (HHS)

## If one of these applies to you, you need to:

- 1. Complete the application found at <a href="https://www.fortdodgeiowa.org/egov/documents/1585793029\_65356.pdf">https://www.fortdodgeiowa.org/egov/documents/1585793029\_65356.pdf</a>
- 2. Attach the Federal, State or local isolation order or appropriate documentation from your family member's health care provider, child care provider statement stating they are closed for reasons related to COVID-19 or documents from HHS.
- 3. Turn these documents in to Human Resources.

What's next? If Human Resources has all the required documentation, you will take two weeks of **consecutive time off** under Emergency Paid Sick Leave at 2/3 your regular rate of pay up to a maximum of \$200 per day. Please make sure your time sheet includes any regular time or other paid time off used during the applicable pay periods.

You have the option to use other paid time off benefits to supplement the other 1/3 of your pay. You can put this time off on your time sheet if you opt to utilize this option.

## If you are able to telecommute, you may not qualify for this leave.

\*Employees may be eligible for up to an additional 10 weeks of paid expanded family and medical leave at two-thirds the employee's regular rate of pay where an employee, who has been employed for at least 30 calendar days, is unable to work due to a bona fide need for leave to care for a child (qualifying reason #5) whose school or child care provider is closed or unavailable for reasons related to COVID-19.