

Employee Certification for Safe Days Usage

Employees who will need to exercise the use of their Vacation and Sick leave as safe days, are required to submit this form certifying that the leave will be used for at least one of the authorized reasons listed below.

Eligible employees are permitted to use earned sick leave and/or vacation leave that can designated as safe days to take time off due to:

- Mental illness, or the need for medical diagnosis, care or treatment of a mental illness of employee or the employee's family member due to a domestic situation
- Physical illness, or the need for medical diagnosis, care or treatment of a physical illness of employee or the employee's family member due to a domestic situation
- Injury, or the need for medical diagnosis, care, or treatment of injury to an employee or employee's family member due to a domestic situation
- Physical illness, or the need for medical diagnosis, care or treatment of a physical illness of employee or the employee's family member due to a domestic situation
- Need for preventive medical care for employee or employee's family member due to a domestic situation need to take actions necessary to restore the physical, psychological, or economic health or safety of the employee or employee's family members or to protect those who associate or work with the employee if the employee or a family member may be the victim of any act or threat of domestic violence or unwanted sexual contact, stalking, or human trafficking.
- Obtain services from a domestic violence shelter, rape crisis center, or other services program employee or employee's family member
- Participate in safety planning, relocate, or take other actions to protect safety, including enrolling children in a new school employee or employee's family member
- Meet with an attorney or social service provider to obtain information and advice related to custody; visitation; matrimonial issues; orders of protection; immigration; housing; discrimination in employment, housing, or consumer credit employee or employee's family member
- File a domestic incident report with law enforcement or meet with a district attorney's office employee or employee's family member.

I, _____ certify that I have used my sick leave, and or vacation leave for one of the listed reasons above.

Dates Requested:

FOR EMPLOYEE

Employee Signature		Personnel #	
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