



Request for Leave per the Families First Coronavirus Response Act (FFCRA)

Pursuant to the Families First Coronavirus Response Act (FFCRA) the City of Riverside will provide employees with paid sick leave or expanded family and medical leave for specified reasons related to COVID-19. These provisions will apply from the effective date from April 1, 2020 through December 31, 2020. This leave provision will expire on December 31, 2020 unless modified under federal or state laws.

Employee Name _____ **Date of Request** _____
Department _____ **Hire Date** _____
Classification _____ **Employee ID** _____

I am requesting (check one or both):

_____ Emergency Family and Medical Leave (“EFMLA”)

_____ Emergency Paid Sick Leave (“EPSL”)

If approved for EFMLA, the first 10 days of this leave are unpaid, but you have the option to substitute your pay during those 10 days with any available accrued vacation, compensatory time, sick, or EPSL.

If you are requesting EFMLA and want to substitute your pay for the first 10 days with EPSL, check both options above and complete sections one (1) and two (2) of this form. Please note, if this is elected, it would be paid at two-thirds your regular rate of pay.

If you are requesting EFMLA and want to substitute your pay for the first 10 days with leave other than EPSL, complete section one (1) of this form to request vacation, compensatory time, or sick leave as you would normally.

certifications related to my need. _____
Employee Initials

- I acknowledge that EPSL is subject to a pay cap of \$511 per day and \$5,110 in the aggregate for reasons 1 – 3 above, and \$200 per day and \$2000 in the aggregate for reasons 4 – 6 above.

Employee Initials

NOTE: Examples of acceptable supporting documentation will vary depending on the reason for EPSL. A reference to the applicable Federal, State or local quarantine or isolation order related to COVID-19 applicable to the employee or written documentation by a health care provider advising the employee to self-quarantine due to concerns related to COVID-19 are examples of acceptable documentation. If EPSL is related to the need to care for a child, acceptable documentation includes a notice that has been posted on a government, school, or day care website, or published in a newspaper, or an email from an employee or official of the school, place of care, or child care provider.

I acknowledge I received a copy of the City's Families First Coronavirus Response Act (FFCRA) policy.

Employee Signature

Date

FOR HUMAN RESOURCES USE:

Request for EFMLA: _____
Approved Denied

Dates of Approved EFMLA: _____

Request for EPSL Approved: _____
Approved Denied

Dates of Approved EPSL: _____

Payroll Codes:

- FFCRA PERS – 3121
- FFCRA NON-PERS – 3122
- FFCRA FMLA PERS – 3123
- FFCRA FMLA NON-PERS – 3124

Denial reason(s): _____

Human Resources Director or Designee

Date