

Bodhi Medical Care, LLC Healthcare for Busy Professionals 330 West 58th Street, Suite 414 New York, NY 10019 Phone: (212) 624 0220 Fax: (212) 624 0220 www.mybodhi.com

Date:

Employee Request for paid Sick time :

Last/ First Name: _____

Dates(s) of Sick time:	
If sick for more than 3	days please provide (attach) documentation.

Reason for absence/sick time (also see below):

I hereby confirm that the information above is true.

Signature:

Usage

Employees may begin using accrued time after the 120th calendar day of employment or the 120th calendar day after April 1, 2014, whichever is later. Sick time may be used in minimum increments of 4 hours.

An employee may not use more than 40 hours of accrued sick time in any calendar year.

Employees may use accrued sick time for absences due to:

(a) The employee's mental or physical illness, injury or health condition or need for medical diagnosis, care or treatment of a mental or physical illness, injury or health condition or need for preventative medical care;

(b) The care of the employee's child, spouse, domestic partner or parent, or the child or parent of the employee's spouse or domestic partner, sibling (including half siblings, step siblings, or siblings related through adoption), grandchild or grandparent who needs medical diagnosis, care or treatment of a mental or physical illness, illness, injury or health condition or who needs preventative medical care; or

(c) Closure of the employee's place of business by order of a public official due to a public health emergency or such employee's need to care for a child whose school or childcare provider has been closed by order of a public official due to a public health emergency.

Notice and Documentation

Employees must provide 7-days' notice of the need to use accrued sick time to their manager if the need is foreseeable. Where the need is not foreseeable, employees should provide notice as early as possible.

The Company will require supporting documentation if the employee uses accrued sick time for more than 3 consecutive days. For sick time used for reasons (a) or (b) above, documentation signed by a licensed health care provider indicating the need for the amount of sick time taken will be considered reasonable documentation and such documentation need not specify the nature of the employee's or the employee's family member's injury, illness or condition. Additionally, the Company may require an employee to provide written confirmation that an employee used sick time in accordance with this policy.

For more information please visit: http://www.nyc.gov/html/dca/html/law/PaidSickLeave.shtml