

PERSONNEL SERVICES

Form 4321

Absences, Leaves and Vacation

Family Medical Leave Act Forms

The following FMLA forms are attached. Copies may be made of the enclosed notice, or additional copies may be obtained from the U.S. Department of Labor, Wage and Hour Division.

Certification of Health Care Provider for Employee's Serious Health Condition	4321.1
Certification of Health Care Provider for Family Member's Serious Health Condition	4321.2
Employee Rights and Responsibilities	4321.3
Notice of Eligibility and Rights & Responsibilities	4321.4
Designation Notice	4321.5
Certification of Qualifying Exigency for Military Family Leave	4321.6
Certification for Serious Injury or Illness of Covered Servicemember - - for Military Family Leave	4321.7