



## 2022 COVID-19 Supplemental Paid Sick Leave (SB114)

Effective January 1, 2022, SB 114 requires most employers in California to provide up to a maximum of 80 hours of Supplemental Paid Sick Leave (SPSL) to eligible employees. **Part-time staff are entitled to the number of hours they would usually work in a two-week period.** Documentation is required. SB 114 is for COVID-19 related leave (see below for qualifying reasons) from January 1, 2022 through September 30, 2022. Pay during this period will be at the employee's daily rate not to exceed \$511 per day or \$5,110 per aggregate.

Employee Name: \_\_\_\_\_  Certificated  Classified  Management

Job Title: \_\_\_\_\_ Site/Department: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Leave Start Date: \_\_\_\_\_ Leave End Date: \_\_\_\_\_

I, \_\_\_\_\_, certify that I am unable to work for one of the following reasons (**Up to 40 hours can be used for the following reasons – prorated for part time employees**):

- I am subject to a Federal, State, or local quarantine or isolation order related to COVID-19. (Documentation required)
- I have been advised by a health care provider to self-quarantine due to concerns related to COVID-19. (Documentation required)
- I am attending an appointment to receive a vaccine or vaccine booster for protection against contracting COVID-19. (Documentation required)
- I am experiencing symptoms related to a COVID-19 vaccine or vaccine booster that prevent me from being able to work or telework.
- I am experiencing symptoms of COVID-19 (e.g., fever [defined as 100.4°F or 37.8°C or greater using an oral thermometer], coughing, and/or shortness of breath) and am seeking a medical diagnosis.
- I am caring for a family member (Documentation required): Relationship to individual: \_\_\_\_\_
  - 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 due to concerns related to COVID-19; or
  - Whose school or place of care is closed or otherwise unavailable for reasons related to COVID-19 on the premises

**Additional Leave for Positive COVID-19 Tests** (**Up to 40 hours can be used for the reasons below – prorated for part time employees.** Note that, in order to receive SPSL for the reasons below, the employee must provide a diagnostic test on or after the fifth day after the initial test was taken and provide documentation of those results to the District.)

- I tested positive for COVID-19 on \_\_\_\_\_ (date). (Documentation required):
- A family member for whom I am providing care tested positive for COVID-19 on \_\_\_\_\_ (date). (Documentation required) Relationship to individual: \_\_\_\_\_

### **Request for Reclassification of Sick Leave Hours:**

- I am requesting that \_\_\_\_\_ hours of sick leave, which I took on the following dates (after January 1, 2022) \_\_\_\_\_ for the purposes which I identified above, be re-classified as COVID-19 supplemental paid sick leave hours.

I understand that if my circumstances change, I must immediately inform my supervisor and the District, and I may be directed to report back to work.

\_\_\_\_\_  
Employee's Signature

\_\_\_\_\_  
Date

**\*Please attached required documentation**