



Sick Leave Notification Form

Instructions:

- i. This form is to be used for **APPOINTED** Monthly and Bi-weekly Employees.
- ii. Complete and submit this form under the following circumstances: 1) when absences exceed 10 consecutive working days or 2) when it is known that the absence will exceed 10 consecutive working days.
- iii. This form must be completed by the Employee's Supervisor, HR Generalist, or Business Officer.
- iv. For Monthly-Appointed Employees, this form is to be used in conjunction with Process B: Sick Leave Longer than 10 working days.
- v. Initial contact for **all** sick leave absences is Anna Maria Gemmiti, Disability & Benefits Advisor at 416.978.2149. Please return the completed form to Health & Well-being Programs & Services (HWB) to annamaria.gemmiti@utoronto.ca.

Employee Information:

| | | | |
|----------------------------|-----------------|------------------------------------|--|
| Title (e.g. Dr., Mr., Ms.) | Surname | First name | |
| Personnel number | Home address | | |
| City | Province | Postal code | |
| Phone # | Cell or Other # | | |
| Department / Division | | Employee Group (e.g. Faculty, USW) | |

Absence Information:

| |
|---|
| Initial Date of Absence (YYYY/MM/DD) |
| Was Employee Asked to Provide a Medical Note? ____ YES ____ NO |
| Has Medical Note Been Received? ____ YES ____ NO (If Yes, please attach a copy to this completed form.) |

Contacts:

| | |
|--|---------------------------------------|
| Supervisor's Name: | HR Generalist's Name: |
| Business Officer (If Applicable) or Designate: | Other U of T Contact (If Applicable): |

| | |
|--------------------------------|--------------------|
| Completed By: (Name and Title) | Date: (YYYY/MM/DD) |
|--------------------------------|--------------------|

Cc: Employee's Supervisor, HR Generalist and Business Officer (as applicable)

The University of Toronto respects your privacy. Personal information that you provide to the University is collected pursuant to section 2(14) of the University of Toronto Act, 1971. It is collected for the purpose of human resources administration and related activities, e.g. recruitment, selection and hiring and payroll and benefits administration. If you have questions, please refer to Health & Well-being Programs & Services.