



TOWN OF PALM BEACH
Emergency Paid Sick Leave Request Form

Employee Name:	Job Title:
Phone number:	Department:
Email:	Immediate Supervisor:

In accordance with Administrative Procedure #1-20-7, I am requesting Emergency Paid Sick Leave (EPSL) as I am unable to work (or work remotely) due to the COVID-19 public health emergency, for one of the following reasons:

- a) Federal, State, or local quarantine or isolation order related to COVID-19;
- b) Being advised by a health care provider to self-quarantine due to concerns related to COVID-19 (provide documentation if available).
- c) Experiencing symptoms of COVID-19 and seeking a medical diagnosis;
- d) Caring for an individual who is subject to an order as described in reason for use (a) above or has been advised as described in reason for use (b);
- e) Caring for a child of such employee if the school or place of care of the child has been closed, or the childcare provider of such child is unavailable, due to COVID-19 precautions.
 - a. Emergency Family Medical Leave may also be requested. If you childcare provider, school, or place of care provided documentation of closure, please attach to this notice. The Town reserves the right to validate closure with the provider, facility, or school.
 - b. Child is defined as your own child, which includes your biological, adopted, or foster child, your stepchild, a legal ward, or a child for whom you are standing in loco parentis—someone with day-to-day responsibilities to care for or financially support a child; or an adult son or daughter (i.e., one who is 18 years of age or older), who (1) has a mental or physical disability, and (2) is incapable of self-care because of that disability.
- f) Experiencing any other substantially similar condition specified by the Secretary of Health and Human Services in consultation with the Secretary of the Treasury and the Secretary of Labor.

I request EPSL for the following dates:

- EPSL for reasons a –c listed above will be at 100% of employee’s regular rate of pay, capped at \$511 per day and \$5,110 in the aggregate for covered reasons.
- EPSL for reasons d –f listed above will be at 2/3 of employee’s regular rate of pay, capped at \$200 per day and \$2,000 in the aggregate for covered reasons.
- Refer to the Administrative Procedure #1-20-7 for additional information, including but not limited to, paid leave provisions for calculation of regular rate of pay.

I may first use EPSL before using any other Town provided paid leave.

- I elect to use EPSL before using any other Town provided leave.
- I elect to use Town leave to supplement any difference between EPSL and my regular rate of pay, the Town leave shall be used in this order: pandemic personal leave, sick, compensatory, annual, or other available leave such as personal, administrative, or floating holiday leave.

Employee Signature

Date

Please submit directly to Human Resources via email to HumanResourcesStaff@townofpalmbeach.com
Questions? Call (561) 838-5450