



Policy 403.7-E8 Medical Documentation of Absence

It is the practice of the Linn-Mar Community School District to require a fitness-for-duty certificate from their physician if an employee has been absent for one calendar week or more due to the employee's personal injury or illness, prior to reporting back to work.

Please see the attached job description to determine return to full duties or restrictions as necessary.

_____ may return to full duties without restrictions on _____.
Employee Name Date

OR

Due to illness/injury on _____ (Date), this employee is not capable of performing the essential functions of their job.

Please indicate any restrictions below and the duration of the restrictions.

Comments: _____

Anticipated date employee can return to full, unrestricted duty: _____

Physician's Printed Name: _____ Date: _____

Physician's Signature: _____

Business Address: _____

Business Phone: _____

Please return form to:

Linn-Mar Community School District
Human Resources Office
2999 N 10th Street, Marion, IA 52302
Phone: 319-447-3053
Fax: 319-377-9252