

SUFFOLK COUNTY WATER AUTHORITY

REQUEST FOR USE OF EXCUSED WORKERS' COMPENSATION TIME

In accordance with CBA Article XV, Section 8

*The Authority will not permit portions of a day to be charged as excused time for medical treatment except if the medical treatment is scheduled during the **last two hours** of a normal workday and the medical treatment is not available at any other time. In addition, the Authority, upon application to the Human Resources Department, may permit employees to charge portions of a day for medical treatment. Requests shall not be unreasonably denied.*

Name: _____

Employee No.: _____

WC Date of Injury/Accident: _____

Type of Excused Time Requested: (Circle one)

MD Visit

WCB Hearing

Physical Therapy

IME

Date of Requested Excused time: _____ Appointment time: _____

Leaving work time: _____ Amount of Time Requested: _____ (max. 2 hours)

Employees must have his/her Supervisor sign this form and submit it to HR along with all supporting medical documentation no later than the following Tuesday of each week (he employees accruals may be charged in the absence of the required documentation).

I certify that my absence from work on the above date/time was due to the reason(s) stated. I understand that providing false or misleading information will result in disciplinary action.

I state that the above information is correct, and all supporting documentation will be submitted.

Employee's Signature/Date

Supervisor's Signature/Date

IN ORDER FOR MEDICAL EVIDENCE TO BE DEEMED ACCEPTABLE, IT MUST INCLUDE:

1. DATE AND TIME OF THE APPOINTMENT ON DOCTOR'S STATIONERY
2. DATE OF WORKERS' COMPENSATION INJURY THAT THE EMPLOYEE IS BEING TREATED FOR AND THAT TREATMENT IS DUE TO THAT JOB RELATED INJURY
3. THE TREATING PHYSICIAN MUST SIGN THE MEDICAL DOCUMENTATION OR PROVIDE THEIR STAMP (**THE TREATING PHYSICIAN SIGNING ONLY THE WDA FORM IS NOT ACCEPTED**)

IN THE CASE OF A WORKERS' COMPENSATION HEARING, THE EMPLOYEE SHOULD ASK THE CLERK AT THE HEARING DESK TO TIME STAMP THE HEARING NOTICE UPON EXIT FROM THE HEARING.

IF ACCEPTABLE DOCUMENTATION IS NOT PROVIDED, THE EMPLOYEE'S ACCRUALS WILL BE CHARGED. PLEASE RETURN THIS FORM TO MICHELLE RUIZ IN HUMAN RESOURCES UPON COMPLETION.