PRIVATE AND CONFIDENTIAL

Duncan Private Hire Self Certification Form

As soon as you return to work after sickness, you must complete the self-certification form covering the first seven days of absence. Your entitlement to Statutory Sick Pay will depend on the evidence of sickness you provide below. The Period of Sickness' dates must be the first and last days of your actual sickness, even if these occurred on rest days, public holidays or other days you would not normally work. Please return your completed form to your line manager.

Employee name:							
I certify that I was unfit for work because of:- Illness Employment injury Other injury							
Period of sickness (includes days upon which you would not normally work):							
	Day	Date	AM/PM	То	Day	Date	АМ/РМ
Date fit for work:							
	Day	Date	AM/PM	1			
Total no. of days absent: Notification given to:							
Reason for absence:							
Please give details of illness (simply stating 'illness' is not sufficient), state if absence resulted from an accident at work.							
Did you consult your Doctor during this absence? Yes No (delete as appropriate)							
Declaration: I certify that the above is a complete and accurate record of my sickness.							
understand that If I provide inaccurate or false information about my absence, with the intention to mislead, this will result in disciplinary action and will affect my entitlement to sick pay.							
Signature of employee: Date:							
For completion by Line Manager:							
Has a Return to Work interview been held? Yes No (delete as appropriate)							
Sign	ature of Mana	ager:			Da	te:	
Nam	e of Manager	:			- 1		

Please return the completed form Leszan Travel Manager.