

California Paid Sick Leave Designated Person Form

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The California Leave Ordinance requires employers to provide paid sick leave to all employees working in California. Employees will be able to take leave under the paid sick leave law and the California Family Rights Act (CFRA) to care for a *designated person*. For both laws, the employer can limit each employee to choosing one designated person per 12-month period. For CFRA, the designated person needs to have a serious health condition and can be anyone who the employee is either related by blood or has a close association with that is equivalent to a family relationship. For paid sick leave, the employee can choose anyone as their designated person.

This designation form must be submitted to the team member's manager within 10 workdays after the effective date. The opportunity to make a designation or changes thereto, is annual, beginning January 1 and thereafter during the first 10 workdays.

If you have any other questions about the Paid Sick Leave, please contact your direct supervisor.

Employees must submit this Designation Form to their supervisor no later than 10 days

after the effective date.

Date Signed:

Employee's Name:

Designated Person's Name:

I designate the person listed above as my Designated Person for whom I may use paid sick leave pursuant to the California Paid Sick Leave Ordinance.

Employee's Signature: