



PERSONNEL SERVICES DIVISION  
CERTIFICATED PERSONNEL  
1400 E. Janss Road, Thousand Oaks, CA 91362-2198  
Telephone: (805) 497-9511 · FAX (805) 449-2631

## FAMILY MEDICAL LEAVE - RETURN TO WORK CERTIFICATION

### EMPLOYEE INFORMATION

<b>E M P L O Y E E</b>	EMPLOYEE NAME:	LAST	FIRST	MIDDLE INITIAL
	POSITION:			
	DEPARTMENT/SCHOOL:			
	CONTACT INFORMATION:	ADDRESS		
		PHONE	EMAIL	

### PLEASE COMPLETE SECTION BELOW TO CERTIFY A RETURN TO WORK DATE FOR EMPLOYEE PRIOR TO RETURN DATE.

<b>H E A L T H  C A R E  P R O V I D E R</b>	Date Employee is Released to Return to Work:			
	Is the individual in your care (i.e. employee) able to return to work?			
	<input type="checkbox"/> Yes: No Restrictions <input type="checkbox"/> Yes: With Restrictions <input type="checkbox"/> No			
	Restriction Type:			
	<input type="checkbox"/> Permanent <input type="checkbox"/> Temporary-specify approximate date: _____			
	Please List Any Restrictions or Describe Accommodations Which the Department Should Consider:			
Name of Health Care Provider:				
Specialty:				
Provider Address:	Street			
	City, State		Zip Code	
I certify the information provided above is accurate to the best of my knowledge.				
Signature of Health Care Provider		Date		

RETURN COMPLETED FORM TO: **CVUSD - CERTIFICATED PERSONNEL DEPARTMENT**  
1400 E. JANSS ROAD  
THOUSAND OAKS, CA 91362-2198  
FAX: 805-449-2631