Schedule of Employee Periodic Reports During Leave (Employer to Complete)

Use this to keep track of the periodic reports by the employee.

Employees on leave must contact Scott Langness (Name) on the _____ (Date) of each month regarding their status and intention to return to work.

Date of Periodic Report	Status of Health Condition	Date of Anticipated Return to Work	Re-Certification Needed Y/N	Signature of Person Who Conducted Periodic Report

*Any forms containing medical information must be kept in a separate, confidential medical file in accordance with the Americans with Disabilities Act.