



Division of Human Resources

EMPLOYEE FITNESS FOR DUTY TO RETURN FROM LEAVE CERTIFICATION

DATE: _____

TO: Health Care Provider

As a condition of return to work, the employee who is on leave due to a serious health condition must have a medical examination. This form must be completed by you, as his/her health care provider, before the employee is allowed to resume his/her job duties.

Employee Name: _____

Employee's Job Title: _____

1. Date of Medical Examination: _____

2. Please indicate with a check mark the status of the employee's release for duty.

_____ Full, unrestricted duty

_____ Modified duty. **(Complete restrictions chart below.)**

_____ No Duty-full restrictions. Not released for any type of duty.

3. Estimated date that employee will be able to return to full, unrestricted duty _____

4. Date of your next medical evaluation of the employee: _____

Complete this section if the employee is being released to modified duty.

PHYSICAL/OTHER EXAMINATIONS	FULL RESTRICTIONS	PARTIAL RESTRICTIONS	NO RESTRICTIONS
Sedentary-Lifting 0 to 10 pounds			
Light-Lifting 10 to 20 pounds			
Moderate-Lifting 20 to 50 pounds			
Heavy-Lifting 50 to 100 pounds			
Pulling/Pushing, Carrying			
Reaching or working above shoulder			
Walking (how many hrs)			
Standing (how many hrs)			
Sitting (how many hrs)			
Stooping (how many hrs)			
Kneeling (how many hrs)			
Repeated Bending (how many hrs)			
Climbing (how many hrs)			
Operating a motor vehicle, etc.			
Other: maintain emotional control under stress			
Exposure Limitation (cold/heat):			

EMPLOYEE NAME: _____

5. Based on my review of the employee's job description, the employee also has the following restrictions:

6. I hereby certify that the foregoing facts are true and correct, and that this form is executed under penalty of perjury at _____, this _____ day of _____, _____.
(List City and State) (month) (year)

Signature of Health Care Provider

Date

Print Name of Health Care Provider

Phone Number

Type of Practice

License No.

Address

City

State

Zip