



Emergency Quarantine Leave

County peace officers and emergency medical technicians shall be placed on paid leave if they are ordered by a supervisor or health authority to quarantine or isolate due to a possible or known on duty exposure to a communicable disease.

Name _____ ID _____

Cell Phone Number _____ Department _____

Check all the statements that apply	Check Box
I have been advised by a health care provider to self-quarantine due to concerns related to a communicable disease	<input type="checkbox"/>
I have been advised by a supervisor to self-quarantine due to concerns related to a communicable disease.	<input type="checkbox"/>
It is my belief that this was a work related exposure.	<input type="checkbox"/>

Please provide a narrative explaining to the best of your ability how, where and when you were exposed. You may attach additional documentation.

I declare under penalty of perjury, that the information provided is true and correct. I understand that abuse of this request may result in disciplinary action up to and including termination of employment.

Employee Signature

Date

Supervisor Signature

Date

In case employee is not available for signature or providing narrative, supervisor will provide required information at the direction of the employee.