

COVID-19 LEAVE EXPLANATION

(Our At-Risk List meeting one of the CDC Guidelines)	(People who need to care for their children)	(Shelter in Place, Quarantine or Isolation)
Employees must have been with SDPC for 12mths or 1250 hours	Employees must have been with SDPC for 30 days	<i>Full-time or Part-time employees</i>
Traditional FMLA	Emergency FMLA	Emergency PAID Sick Leave Pay
Compensation Guidelines:	Compensation Guidelines:	Compensation Guidelines:
FMLA is unpaid medical leave act by Federal Law	2/3 of the employees regular rate of pay will be paid up to 12 weeks if caring for a son or daughter or	80 hours of paid leave for <i>full-time</i> employees
You may use your sick leave to run concurrently with the 60 days in order to receive a paycheck. This would ensure that you continue to receive insurance and retirement benefits	An employee can volunteer to use their leave days to receive full pay for up to 12 weeks	2 weeks equivalent of paid leave for <i>part-time</i> employees
		Will not required an employee to use or exhaust sick or other paid leave first
The following reasons fall in this category of leave:	The following reasons fall in this category of leave:	The following reasons fall in this category of leave:
Covers the serious health condition of employee, employee's son, employee's daughter, employee's spouse or parent.	Is caring for his or her child whose school or place of care is closed (or child care provider is unavailable) due to COVID-19 related reasons.	Is subject to a Federal, State, or local quarantine or isolation order related to COVID-19
Covers for the birth of a newborn son or daughter or placement by adoption or foster care.		Is experiencing COVID-19 symptoms and is seeking a medical diagnosis
Covers for a qualifying exigency because son, daughter, spouse, or parent is on active military duty.		Has been advised by a health care provider to self-quarantine related to COVID-19
Covers for an employee to care for a covered service member with a serious illness or injury.		Is caring for an individual subject to to a Federal, State, or local quarantine or isolation order related to COVID-19 (2/3 of an employees regular rate of pay or \$200 daily not to surpass \$2000 in total
Does not cover for an employee to care for son or daughter because school or daycare are closed due to COVID-19.		
Documentation Needed to be approved:	Documentation Needed to be approved:	Documentation Needed to be approved:
Complete form at the given link:	Complete form at the given link:	Complete form at the given link:
District will send the appropriate paperwork to you	Letter or Email stating the need for this provision	Scan or Email Government Documentation
Medical Documentation as appropriate		Medical Documentation as appropriate

Link to exercise one of these leave options: <https://forms.gle/oyvMmAzhE1kvwX4T8>
 Questions pertaining to these leave options, please go to hr@pickens.k12.sc.us