

Employee Name:

## RECRUITING SOLUTION, INC.

## "DESIGNATED PERSON" FORM FOR PAID SICK LEAVE

San Francisco and Oakland Employees

Under the San Francisco and Oakland Paid Sick Leave Ordinances, employees may use paid sick leave when they or a member of their family are ill or injured or for the purpose of receiving medical care, treatment, or diagnosis.

In addition to using paid sick leave as specified above, if an employee has no spouse or registered domestic partner, he or she may designate one person for whom the employee may use paid sick leave to aid or care for the person.

Employers must offer the opportunity to make a designation no later than 30 work hours after the date paid sick leave begins to accrue. Employees have 10 work days to make this designation, and thereafter do not have the right to make or change the designation until next offered by the employer. Employers must offer the opportunity to make or change the designation on an annual basis, again with a window of 10 work days for the employee to make or change the designation.

Name of Designated Person:	
I certify that I have no spouse or registered domestic part person listed above as my Designated Person for whom I pursuant to the San Francisco Paid Sick Leave Ordinanc have a spouse or registered domestic partner in the future to use paid sick leave to care for my Designated Person.	may use paid sick leave e. I understand that if I
Employee Signature:	Date: