

**Sick Leave Form – Hourly paid staff – Statutory Sick Pay**

**Statutory Sick pay effective 1 January 2023 legal right to be paid while you are on sick leave from work. You must be an employee and be working at least 13 weeks to avail of this sick pay.**

**This sick leave form must be forwarded to the Compensation & Benefits Office, Human Resources Division once completed by Line Manager/Supervisor in order to process payment for this absence**

* **Notification** of absence due to illness should be made by telephone to the Dean/Head of Department/Manager within one hour after start time on the first day of absence.
* **Certified Sick Leave -** A Medical Certificate must be provided to the Dean/Head of Department/Manager in all circumstances where you are absence on a day you were scheduled to work
* The **University of Limerick Sick Leave Scheme**, available on the Human Resources website, provides details of Statutory Sick pay for hourly paid staff, sick days can be taken as consecutive days or non-consecutive days
* 2023 – 3 Days covered
* 2024 – 5 Days covered
* 2025 – 6 days covered
* 2026 – 10 days covered

|  |
| --- |
| To be completed by the Supervisor/Line Manager |
| Employee Name: | I.D. Number: |
| School/Unit: | PPS Number: |
| Sick leave commenced on: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date  |
| Sick leave ended on: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date  |
| **To be completed by Line Manager**Was the hourly employee scheduled to work this day: Yes  No Please confirm the number of hours the employee was scheduled to work that day:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Has the employee worked the previous 13 weeks: Yes  No Medical Certificate attached (this is required to process sick leave payment): Yes  No I understand that 70% of normal weekly pay up to a maximum of €110 a day will be paid**Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **Supervisor** |

|  |
| --- |
|  |