



South Texas Educational Technologies, Inc.

Human Resources Department
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**Certification of Health Care Provider
Sick Leave Pool**

*Conditions eligible for Sick Leave Pool awards must be considered catastrophic. A catastrophic illness or injury is defined as a **severe** condition or combination of conditions affecting the mental or physical health of the employee that requires treatment by a licensed medical practitioner for a prolonged period of time. For purposes of Sick Leave Pool, pregnancy and elective surgery are not considered catastrophic conditions, except when life-threatening complications arise from them.*

Employee's Name: _____

TO BE COMPLETED BY PHYSICIAN AND RETURNED TO THE EMPLOYEE:

Nature of severe illness or injury and prescribed treatment: _____

Date employee was first examined with this condition: _____

Can employee perform the essential functions of the job? Yes No

If no, explain limitations:

Duration of limitations:

Prognosis:

Employee may return to work full time on _____ or part-time on _____ (If more time is needed, this date may be extended with proper medical documentation.)

Signature of Health Care Provider

Type of Practice

Street Address: _____

City: _____ State _____ Zip Code: _____

Date: _____