



**Royal  
Veterinary  
College**

University of London

**EMPLOYEE SICKNESS - SELF CERTIFICATE**

**PRIVATE & CONFIDENTIAL**

**NOTE: To be completed in the case of sickness absences from 1-7 days duration  
Please complete in block capitals**

Name \_\_\_\_\_

Department \_\_\_\_\_ Section \_\_\_\_\_

**PERIOD OF SICKNESS**

Date of First Day of Sickness Absence \_\_\_\_\_

Date of Last Day of Sickness Absence \_\_\_\_\_

Date of Return to Work \_\_\_\_\_

Reason for Absence (see attached list) \_\_\_\_\_

Category \_\_\_\_\_

Could your absence have been due to a work-related injury/condition? YES/NO

Has an accident report form been completed? YES/NO

Is the absence related to a previous absence? YES/NO

**DECLARATION**

I declare that I have not worked during the period of sickness stated above and that the information given is factually correct. I understand that to give false or misleading information can result in disciplinary proceedings.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature of Line Manager \_\_\_\_\_ Print name \_\_\_\_\_ Date \_\_\_\_\_

Warning: Under the Data Protection Act 2018 'Sensitive Data' such as details of sickness absence will be held about you. The above data will be used to calculate and pay benefits, meet Health & Safety requirements and to meet the College's duty of care to all employees. In signing this form you consent to processing of personal data within the terms of the RVC's data protection policies.

Please see overleaf for Guidance Notes

Guidance Notes for Self Certification

- The 'Employee Self Certification' form must be completed by all staff for each period of absence including single day absences which are not covered by a doctor's certificate.
- All staff must report any absence on the first day by telephoning their line manager or designated deputy. It is not acceptable to leave a message with reception or colleagues who are not designated.
- Details of any absence must also be conveyed to the department's designated sickness co-ordinator prior to the end of each week.
- Upon the day of return from any absence not covered by a doctor's certificate the 'Employee Self-Certification' form must be completed, signed by both the employee and line manager and forwarded to Human Resources within 3 working days of the return to work date.
- If sickness absence exceeds 7 days (including Saturday & Sunday) you must obtain a doctor's certificate and send this to Human Resources.
- The term 'work-related' means that the injury/condition occurred whilst on College premises/business.
- When completing the 'Reason for Absence' the attached list should be used. **Please state, as a minimum, a sickness category. It is the employee's choice if they wish to disclose specific reasons.** Please make sure you have the employee's consent before returning specific reasons.
- If you have difficulty selecting a category please contact Human Resources for clarification.
- All staff should have a return to work interview with their Line Manager on the day of return from absence. A form is available for this purpose on the Human Resources website.

CATEGORY	EXAMPLES	CATEGORY	EXAMPLES
<b>Musculo-skeletal Back &amp; Neck</b>	Sciatica	<b>Respiratory</b>	Colds, flu Pneumonia / bronchitis Asthma - work-related Asthma - other Lung infections TB
<b>Musculo-skeletal Upper limb</b>	Arm, hand Shoulder	<b>Skin</b>	Eczema Psoriasis Shingles Infections Allergy - work-related Allergy - other
<b>Musculo-skeletal other</b>	Lower limb Head injuries Other injuries Road traffic accidents Multiple injuries Abdominal strain Arthritis Inguinal Hernia Hiatus Hernia	<b>Genito Urinary</b>	Recurrent miscarriage Cystitis Stones Pregnancy Hysterectomy D & C Prostate conditions Period pains Irregular bleeding

<b>Cardiovascular</b>	High blood pressure Angina / Heart Attack Stroke Deep vein thrombosis (DVT) Varicose veins Palpitations Heart operations Reynaud's Disease Blood Disorders	<b>Nervous system</b>	Migraine Multiple sclerosis Epilepsy Vertigo Cerebral Palsy
<b>Gastro-intestinal</b>	Bowel disorders Liver / Gall bladder Acid reflux Diarrhoea / Vomiting Haemorrhoids (piles) Appendicitis Ulcer	<b>Misc symptoms</b>	Malaise / debility Headache Dizziness Glandular Fever Post viral lethargy
<b>Mental Ill Health</b>	Major psychiatric illness Stress / PTSD Anxiety / Panic disorder Depression Eating Disorders OCD Drug induced psychosis	<b>ENT &amp; Eyes (Ear, Nose &amp; Throat)</b>	Allergy - work-related Allergy - other Infections / sinusitis Hayfever Sleep Apnoea
<b>Cancer</b>	Unspecified cancers Hodgkins Lymphoma Leukemia	<b>Other</b>	Childhood (infectious) diseases Alcohol and drug addiction Dental Indecipherable conditions
<b>Endocrine</b>	Diabetes Hypo/hyperthyroid		