



SICK LEAVE

It is important that you contact your supervisor or shiftleader in case of sickness, and after that immediately Induconts office.

In order to eligible for reimbursement, you must complete this form. Compensation may be paid only after we have received the form.

Name: _____

Identification no: _____

Site: _____

Shift leader: _____

Supervisor: _____

Is your shiftleader informed: Yes No

Back in service: _____

Cause:

Medical certificate: Yes No

If you have medical certificate, this shall always accompany your sick leave!