**Chelmsford Diocesan Board of Finance**

Clergy Self-Certification of Absence

Please complete this form if you are unable to perform the duties of your office because of illness for a period of sickness absence of up to 7 calendar days

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| **Name** |  |
| **Role** |  |

**Period of absence**

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| I certify that I was unable to work for the period detailed below. |
| Date sickness absence began (include non-working days) |  |
| Last date of sickness absence (include non-working days) |  |
| Date returned to work |  |
| Total number of working days absent from duties (include Bank Holidays) |  |
| First notification of illness - give details of who you contacted. ***This maybe the Archdeacon, Incumbent, Training Incumbent or the Area Dean*** |

Reason for your absence

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| Please give details of your illness/symptoms or describe the injury. Words like “illness” or “unwell” are not sufficient.  |

**Details of treatment (as appropriate)**

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| Did you see a doctor or attend a hospital or clinic (please indicate as appropriate and provide any relevant information)? | **YES** (please delete as appropriate) | **NO** (please delete as appropriate) |

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| **In the event that a period of sickness absence exceeds 7 calendar days** (this includes working and non-working days), it will be necessary for you to provide a Statement of Fitness to Work (from the 7th day of absence).[[1]](#footnote-1) This can be obtained from your healthcare professional: doctor/consultant, nurse, occupational therapist, pharmacist, physiotherapist. |
| If the absence resulted from an accident at work, was this reported at the time and entered in the relevant Accident Book?  | **YES** (please delete as appropriate) | **NO** (please delete as appropriate) |

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| Is there anything the Diocese can do to assist you with your recovery or help you in the longer term if your reason for sickness is likely to reoccur? |

**Declaration**

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| I certify that the information supplied above is a true and accurate record.  |
| Signed |  | Date |

***A copy of this form should be shared with your Area Dean/Archdeacon.***

**This completed form should be returned to the HR Department at**

**the Diocesan Office at** **hr@chelmsford.anglican.org** **or post to**

 **The Diocesan Office, 53 New Street, Chelmsford CM1 1AT**

*If you have any initial questions/queries about the form please contact Angela Coote,*

 *HR Administrator at* *acoote@chelmsford.anglican.org* *or on 01245 294409*

1. 1Further information may be found in the Handbook for Ecclesiastical Office Holders [↑](#footnote-ref-1)