# Time Off Options for Staff Due to COVID-19

Under applicable federal laws, Princeton University Occupational Health reserves the right to determine if a condition or diagnosis rises to the level of a disability and what constitutes as reasonable, necessary, and appropriate accommodations according to the functional limitations of the disability. Accommodations may not alter the essential skills and/or the fundamental nature of a course or program.

<table>
<thead>
<tr>
<th>Employee Condition</th>
<th>First Option</th>
<th>Second Option</th>
<th>Third Option</th>
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</tr>
</thead>
<tbody>
<tr>
<td>1 Tested positive for COVID-19 AND is unable to perform job duties from home</td>
<td>Use Short Term Disability&lt;br&gt;Requires:&lt;br&gt;• Submit special COVID-19 application&lt;br&gt;• Casual employees may be eligible</td>
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<td>Policy 3.1.9 Short Term Disability</td>
</tr>
<tr>
<td>2 Has symptoms of COVID-19 for 8 or more consecutive days AND is unable to perform job duties from home</td>
<td>Use Short Term Disability&lt;br&gt;Requires:&lt;br&gt;• Submit special COVID-19 application&lt;br&gt;• Casual employees may be eligible</td>
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<td>3 Was exposed AND is not sick AND is advised to self-quarantine for 8 or more consecutive days by a healthcare provider/Occupational Health Services AND is unable to perform job duties from home</td>
<td>Use Short Term Disability&lt;br&gt;Requires:&lt;br&gt;• Email the Benefits Team at <a href="mailto:benefits@princeton.edu">benefits@princeton.edu</a> with the date of the first day of self-quarantine&lt;br&gt;• Casual employees may be eligible</td>
<td></td>
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<td>Policy 3.1.9 Short Term Disability</td>
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<td>4 State of New Jersey domestic travel advisory and rules for incoming 10-day quarantine from certain states wherein there is significant spread of COVID-19 AND is unable to perform job duties from home</td>
<td>Use COVID-19 Days&lt;br&gt;Requires:&lt;br&gt;• Notification to supervisor and submission of assessment form to Global and Community Health</td>
<td>Use Paid Leave Days: sick, vacation, personal, bundled time&lt;br&gt;Requires:&lt;br&gt;• Notification to supervisor and submission of assessment form to Global and Community Health</td>
<td>Use Unpaid Leave of Absence form</td>
<td>Policy 3.1.12 COVID-19 Days</td>
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| 5  Has symptoms of COVID-19 for less than 8 consecutive days or advised to self-quarantine | Use COVID-19 Days  
Requires:  
• Supervisory approval  
• Enter in Time & Absence Management | Use Paid Leave Days: sick, vacation, personal, bundled time  
Requires:  
• Supervisory approval  
• Enter in Time & Absence Management | Use Unpaid Leave of Absence form/Public Health Emergency (reason code)  
Policy 3.1.12 COVID-19 Days  
HR Policy & Procedures Manual |  
| 6  Cannot work since school or daycare closed                                      | Use COVID-19 Days  
Requires:  
• Supervisory approval  
• Enter in Time & Absence Management | Use Paid Leave Days: sick, vacation, personal, bundled time  
Requires:  
• Supervisory approval  
• Enter in Time & Absence Management | Use Unpaid Leave of Absence form for up to one month  
May be eligible for state unemployment benefits  
Policy 3.1.12 COVID-19 Days  
HR Policy & Procedures Manual |  
| 7  Is caring for a sick or exposed family member                                  | Use COVID-19 Days  
Requires:  
• Supervisory approval  
• Enter in Time & Absence Management  
Then Use Paid Family Leave Policy days  
Requires:  
• Supervisory approval  
• Submit Certification of Healthcare Provider form | Use Paid Leave Days: sick, vacation, personal, bundled time  
Requires:  
• Supervisory approval  
• Enter in Time & Absence Management | Use NJ Family Leave Insurance  
Requires:  
• After paid time off is exhausted or in lieu of using paid time off  
• Apply directly to State of New Jersey  
Policy 3.1.12 COVID-19 Days  
Policy 3.1.1 Paid Family Leave Policy: Revised and Renamed from Paid Parental Leave  
HR Policy & Procedures Manual |  
| 8  Is in a high-risk group as defined by the Centers for Disease Control (CDC) AND advised by a healthcare provider to self-quarantine at home AND cannot work from home because job duties have to be performed on campus | Use COVID-19 Days  
Requires:  
• A doctor’s note that confirms the individual is high risk as defined by the CDC but does not include the actual high-risk category in accordance with medical confidentiality and privacy laws  
• Supervisory approval  
• Enter in Time & Absence Management | Use Paid Leave Days: sick, vacation, personal, bundled time  
Requires:  
• A doctor’s note that confirms the individual is high risk as defined by the CDC but does not include the actual high-risk category in accordance with medical confidentiality and privacy laws  
• Supervisory approval  
• Enter in Time & Absence Management | See #13  
Policy 3.1.12 COVID-19 Days  
HR Policy & Procedures Manual |  

**Notes:**
- Employees should consult with their supervisor before taking any leave.
- Employees should use Time & Absence Management to enter time.
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<td>9 Is in a high-risk group as defined by the Centers for Disease Control (CDC) AND is seeking workplace accommodation</td>
<td>Use Work with department and HR for accommodations discussion Requires: • A doctor’s note that confirms the individual is high risk as defined by the CDC • Applies to benefits-eligible and casual employees</td>
<td>Use COVID-19 Days Requires: • Supervisory approval Enter in Time &amp; Absence Management</td>
<td>Use Paid Leave Days: sick, vacation, personal, bundled time Requires: • Supervisory approval Enter in Time &amp; Absence Management</td>
<td>Policy 5.1.7 Reasonable Accommodations for Disabilities Policy 3.1.12 COVID-19 Days HR Policy &amp; Procedures Manual</td>
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<tr>
<td>10 Family member is high-risk as defined by the Centers for Disease Control (CDC) but does not require specific care as certified by a healthcare provider</td>
<td>Use COVID-19 Days Requires: • Supervisory approval Enter in Time &amp; Absence Management</td>
<td>Use Paid Leave Days: sick, vacation, personal, bundled time Requires: • Supervisory approval Enter in Time &amp; Absence Management</td>
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<td>Policy 3.1.12 COVID-19 Days HR Policy &amp; Procedures Manual</td>
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<td>11 Is biweekly-paid AND released from working onsite for all or part of the work time AND is unable to perform work duties from home as duties have to be performed on campus AND/OR may be on a rotational work schedule on campus</td>
<td>Use Paid Public Health Emergency Release Time Requires: • Supervisory approval Enter RFWPH-Released public health emergency time reporting code on the timesheet in Time &amp; Absence Management</td>
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<tr>
<td>12 Is monthly-paid AND released from working onsite for all or part of the work time AND is unable to perform work duties from home as duties have to be performed on campus AND/OR may be on a rotational work schedule on campus</td>
<td>Use Paid Leave of Absence form/Public Health Emergency (reason code)</td>
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<td>13 Is monthly-paid or biweekly-paid AND is unable to perform work duties from home as duties have to be performed on campus AND is in a high-risk group as defined by the Centers for Disease Control (CDC) but is not placed on disability by a healthcare provider AND has used all available paid time off</td>
<td>Discussion between supervisor, Sr HR Manager and employee to determine options, next steps.</td>
<td>Use Unpaid Leave of Absence form/Public Health Emergency (reason code). Unpaid leave needs to be approved by supervisor and is for a total of one month</td>
<td>If no documented medical reason is communicated, after the one month of unpaid leave, the employee would be terminated.</td>
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