

[**Employers:** This is a sample employee notice employers can use to inform their employees about earned sick and safe time as required under [Minnesota Statutes § 181.9447, subdivision 9](#). Instructions for completing this notice are in brackets. Delete all instructions before providing this to the employee.]

Earned sick and safe time employee notice

Employees in Minnesota are entitled to earned sick and safe time, a form of paid leave. Employees must accrue at least one hour of earned sick and safe time for every 30 hours they work, up to at least 48 hours in a year. [If you are using a more generous accrual system or a front-loading system, edit the previous sentence and insert the applicable system for the employee who will receive this notice.] A year for purposes of the employee's earned sick and safe time accrual is: [Note here how you define the accrual or benefit year for the employee. Examples include the calendar year, year by work anniversary or another 12-month period.]

At the end of each pay period, employers must provide employees with the number of earned sick and safe time hours used by the employee during the pay period and available for future use. Earned sick and safe time must be paid at the same base rate employees earn from employment. Employees are not required to seek or find a replacement for their shift to use earned sick and safe time. They may use earned sick and safe time for all or part of a shift, depending on their need.

Earned sick and safe time can be used for:

- an employee's mental or physical illness, treatment or preventive care;
- the mental or physical illness, treatment or preventive care of an employee's family member;
- absence due to domestic abuse, sexual assault or stalking of an employee or their family member;
- closure of an employee's workplace due to weather or public emergency or closure of their family member's school or care facility due to weather or public emergency; and
- when determined by a health authority or health care professional that an employee or their family member is at risk of infecting others with a communicable disease.
- to make arrangements for or attend funeral services or a memorial or address financial or legal matters that arise after the death of a family member.

Notifying employer, documentation

An employer can require their employees to provide up to seven days of advance notice when possible (for example, when an employee has a medical appointment scheduled in advance) before using sick and safe time. An employer can also require their employees to provide certain documentation regarding the reason for their use of earned sick and safe time if they use it for more than three consecutive scheduled workdays.

[The following is an example of an employer policy for employees to provide notice before using earned sick and safe time. Edit the following text to match your company's policy.] If an employee plans to use earned sick and

safe time for an appointment, preventive care or another permissible reason they know of in advance, inform [name or position] by [phone, email or other communication] as far in advance as possible, but at least [number between one and seven] days in advance. In situations where an employee cannot provide advance notice, the employee should contact [name or position] at [phone, email or other communication] as soon as they know they will be unable to work.

Retaliation, right to file complaint

It is against the law for an employer to retaliate, or to take negative action, against an employee for using or requesting earned sick and safe time or otherwise exercising their earned sick and safe time rights under the law. If an employee believes they have been retaliated against or improperly denied earned sick and safe time, they can file a complaint with the Minnesota Department of Labor and Industry. They can also file a civil action in court for earned sick and safe time violations.

For more information

Contact the Minnesota Department of Labor and Industry’s Labor Standards Division at 651-284-5075 or esst.dli@state.mn.us or visit the department’s earned sick and safe time webpage at sickleave.mn.gov.

This document contains important information about your employment. Check the box at the left to receive this information in this language or write at the bottom of the document the language you are requesting.

Spanish/Español	Este documento contiene información importante sobre su empleo. Marque la casilla a la izquierda para recibir esta información en este idioma.
Hmong/Hmoob	Daim ntawv no muaj cov xov tseem ceeb hais txog thaum koj ua hauj lwj. Khij lub npauv ntawm sab laug yog koj xav tau cov xov tseem ceeb no txhais ua lus Hmoob.
Vietnamese/Việt ngữ	Tài liệu này chứa thông tin quan trọng về việc làm của quý vị. Đánh dấu vào ô bên trái để nhận thông tin này bằng Việt ngữ.
Simp. Chinese/简体中文	本文件包含与您的雇用相关的重要信息。勾选左边的方框将接收以这种语言提供的信息。
Russian/русский	Данный документ содержит важную информацию о вашем трудоустройстве. Отметьте галочкой квадрат слева для получения этой информации на данном языке.
Somali/Soomaali	Dokumentigan waxaa ku qoran macluumaad muhiim ah oo ku saabsan shaqadaada. Calaamadi sanduugaan haddii aad rabto inaad macluumaadkan ku hesho luqaddan.
Laotian/ລາວ	ເອກະສານນີ້ມີຂໍ້ມູນທີ່ສໍາຄັນກ່ຽວກັບການຈ້າງງານຂອງທ່ານ. ກວດເບິ່ງກ່ອງທີ່ຢູ່ເບື້ອງຊ້າຍເພື່ອຮັບຂໍ້ມູນນີ້ໃນພາສາລາວ.
Korean/한국어	이 문서에는 귀하의 고용 형태에 관련된 중요한 정보가 담겨있습니다. 이 언어로 이 정보를 받기를 원하시면 왼쪽 상자에 체크하여 주세요.
Tagalog/Tagalog	Ang dokumentong ito ay nagtataglay ng mahalagang impormasyon tungkol sa iyong pagtatrabaho. Lagyan ng tsek ang kahon sa kaliwa upang matanggap ang impormasyong ito sa wikang ito.
Oromo/Oromoo	Waraqaan kun waayee hojii keetii odeeffannoo barbaachisoo ta’an qabatee jira. Saaxinnii karaa bitaatti argamu kana irratti mallattoo godhi yoo afaan Kanaan barreeffama argachuu barbaadde.
Amharic/አማርኛ	ይህ ደብዳቤ ለአገልግሎት ለሚሰጡት ለሰራተኛ የያዘ ነው። ይህንን ደብዳቤ በስተገራ በኩል ባለው ቋንቋ ተተርጉሞ ለንዲሰጡት ከፈለጉ በዛው በስተገራ በኩል ባለው ባጥን ውስጥ ምልክት ያድርጉ።
Karen / ကညီကျိာ်	လၢ်တၢ်စၢ်စီတၢ်ခါအဲၤလၢ်တၢ်တၢ်ဂ့ၢ်တၢ်ကၠိၤအကၢၤခိၣ်လၢ်အဘၣ်သးဒီးန့ၢ်တၢ်ပံးတၢ်ဖၢၤန့ၣ်လၢ်. တၢ်န့ၣ်တၢ်တၢ်လၢ်အစ့ၣ်တၢ်ကတၢၤလၢ်တၢ်ကတၢၤဒီးန့ၢ်တၢ်ဂ့ၢ်တၢ်ကၠိၤလၢ်ကၠိၣ်တၢ်ခါအဲၤလၢ်တၢ်ကတၢၤ.
Arabic/العربية	يحتوي هذا المستند على معلومات مهمة حول عملك. ضع علامة في المربع على اليمين للحصول على هذه اللغة. المعلومات في هذه اللغة.