

Return to: HR Service Center  
Skytop Office Building  
Syracuse, NY 13244-1200  
[leaveadmin@syr.edu](mailto:leaveadmin@syr.edu)  
Phone: 315.443.4042  
Fax: 315.443.1063

Name of Faculty Member		Last Day Worked	
Job Title		Department	

**Instructions for Department**

Please review the job responsibilities listed below. If any of these tasks do not apply to the faculty member listed above, please indicate “N/A” next to the applicable task. If faculty member has additional responsibilities, please specify in section 11.

**Instructions for Healthcare Provider**

Syracuse University wants to assist our faculty members with a successful return to work transition, as soon as appropriate. To do so, information on their condition of health is needed from you, their healthcare provider. Please include sufficient details to enable the University to make an evaluation of the Faculty member’s ability to return to work. Complete information should minimize the need for further correspondence or telephone calls.

*Note: The duty requirements listed below are based upon the current essential functions of the position. The number of classroom teaching assignments, committee assignments or student advisees may fluctuate each semester.*

Current Essential Functions (To be reviewed by Department)	Current Abilities (To be completed by Healthcare Provider)		
	<i>Able to Perform Task (Y/N)</i>	<i>Restrictions (Detailed Description)</i>	<i>Duration of Restrictions</i>
1. Assigned classroom teaching  #Classroom Hours/Week			

<b>Current Essential Functions</b> <b>(To be reviewed by Department)</b>	<b>Current Abilities</b> <b>(To be completed by Healthcare Provider)</b>		
<i>Tasks</i>	<i>Able to Perform Task (Y/N)</i>	<i>Restrictions (Detailed Description)</i>	<i>Duration of Restrictions</i>
2. Advance preparation for teaching (develop syllabus, order books & materials, prepare class lectures, etc.)			
3. Student advising/Office hours of at least two hours per week (predetermined times)			
4. Timely grading of assignments and examinations			
5. Productivity as appropriate to the field of concentration and scope of projects undertaken, including research, journal articles, books and other scholarly artifacts			
6. University service to include attendance at meetings; research and study on an independent basis outside of meetings; conferring with others who might be relevant.			
7. Supervision of projects appropriate for the professor's field of concentration			
8. Supervision/mentoring of students within the professor's field of concentration			

Current Essential Functions (To be reviewed by Department)	Current Abilities (To be completed by Healthcare Provider)		
<i>Tasks</i>	<i>Able to Perform Task (Y/N)</i>	<i>Restrictions (Detailed Description)</i>	<i>Duration of Restrictions</i>
9. Professional or public service (includes participation in disciplinary conferences, task forces or committees)			
10. Concentration (Activities may include reading, studying, writing, memory)			
11. Special Responsibilities (specify)			

For what period of time will the above evaluation be appropriate? .....

Return to Work Date ..... *To be answered by healthcare provider*

**Health Care Provider Information**

Provider Name		Specialty	
Provider Address			
Provider Phone #		Fax #	
Provider Signature		Date	