

Return to: HR Service Center
Skytop Office Building
Syracuse, NY 13244-1200
hrrservice@syr.edu
Phone: 315.443.4042
Fax: 315.443.1063

Name of Faculty Member		Last Day Worked	
Job Title		Department	

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	Current Abilities (To be completed by Healthcare Provider)		
	Able to Perform Task (Y/N)	Restrictions (Detailed Description)	Duration of Restrictions
1. Assigned classroom teaching #Classroom Hours/Week			
2. Advance preparation for teaching (develop syllabus, order books & materials, prepare class lectures, etc.)			

Current Essential Functions	Current Abilities (To be completed by Healthcare Provider)		
	<i>Tasks</i>	<i>Able to Perform Task (Y/N)</i>	<i>Restrictions (Detailed Description)</i>
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			
9. Professional or public service (includes participation in disciplinary conferences, task forces or committees)			

Current Essential Functions	Current Abilities (To be completed by Healthcare Provider)			
	Tasks	Able to Perform Task (Y/N)	Restrictions (Detailed Description)	Duration of Restrictions
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	