



Sample Sick Policy

The purpose of this policy is: to protect our customers and employees from illness and the transmission of diseases. In addition, this policy (and further training) ensures that all employees understand the relationship between health and hygiene and food safety. Because we care about the health of you and our customers, it is **required** that you:

1. Practice excellent personal hygiene, especially thorough and frequent hand washing.
2. Avoid bare hand contact with ready-to-eat foods.
3. Notify your Shift Manager/Store Manager, and stay home from work if:
 - You have any of the following:
 - Fever
 - Sore throat with fever
 - Diarrhea or abdominal cramping
 - Vomiting
 - Jaundice
 - Infected wound or lesion
 - Active symptoms caused by seasonal allergies or hay fever including persistent cough, running nose, or sneezing

NOTE: Do not return to work until you are symptom-free for 24 hours.

- You are diagnosed with, have been exposed to an outbreak of, or live with someone who has been exposed to an outbreak of an illness caused by any one of the following:
 - Salmonella spp
 - Shigella spp
 - Entamoeba histolytica
 - Enterohemorrhagic or shiga toxin producing Escherichia coli
 - Hepatitis A virus
 - Norovirus
 - Campylobacter
 - Cryptosporidium
 - Giardia

I understand the requirements concerning my responsibilities to comply with:

1. Reporting requirements specified above involving reportable illnesses, symptoms, and conditions;
2. Work restrictions or exclusions that are imposed upon me; and
3. Good hygienic practices.

I understand that any violation of this policy could lead to disciplinary action, up to and including termination of my employment.

Employee Name (please print): _____ Store/Location: _____

Signature of Employee: _____ Assoc. #: _____

Signature of Shift Manager: _____ Date: _____