ATTACHMENTS

Attachment 1	Employee Rights and Responsibilities Under the Family and Medical Leave Act (WHD Publication 1420) <i>Please note: a copy of this poster can be downloaded from</i> <u>http://www.dol.gov/whd/regs/compliance/posters/fmlaen.pdf</u> .
Attachment 2	Certification of Health Care Provider for Employee's Serious Health Condition (Family and Medical Leave Act) (Form WH- 380-E) <i>Please note: a copy of the certification form can be downloaded from</i> <u>http://www.dol.gov/whd/forms/WH-380-E.pdf</u> .
Attachment 3	Certification of Health Care Provider for Family Member's Serious Health Condition (Family and Medical Leave Act) (Form WH-380-F) <i>Please note: a copy of this form may be downloaded from</i> <u>http://www.dol.gov/whd/forms/WH-380-F.pdf</u> .
Attachment 4	Notice of Eligibility and Rights & Responsibilities (Family and Medical Leave Act) (Form WH-381) Please note: a copy of this form may be downloaded from http://www.dol.gov/whd/forms/WH-381.pdf.
Attachment 5	Designation Notice (Family and Medical Leave Act) (Form WH-382) <i>Please note: a copy of this form may be downloaded from</i> <u>http://www.dol.gov/whd/forms/WH-382.pdf</u> .
Attachment 6	Certification of Qualifying Exigency for Military Family Leave (Family and Medical Leave Act) (Form WH-384) <i>Please note: a copy of this form may be downloaded from</i> <u>http://www.dol.gov/whd/forms/WH-384.pdf</u> .
Attachment 7	Certification for Serious Injury or Illness of Covered Servicemember—for Military Family Leave (Family and Medical Leave Act) (Form WH-385) <i>Please note: a copy of this form may be downloaded from</i> <u>http://www.dol.gov/whd/forms/WH-385.pdf</u> .