

Managing Absence and Incapacity of Clergy**ABSENCE NOTIFICATION DAY I**

Ministry Area / Deanery:	
Message received from	
Date and time	
Re: Absence of Name	
Parish	

Reason for absence (please be specific)	
Date on which sickness began	
Likely date of return	
If this absence is due to an injury sustained in the course of duty please provide full details of incident.	
Date of Incident	
Signed	
Date	

NOTIFICATION OF INCAPACITY

If you are incapacitated, please complete the following and send it to the address below. If your incapacity continues for more than seven days, an appropriate medical certificate should be sent to the People Services Team as well as this form.

Full Name	<input type="text"/>
Employee No: (if known)	<input type="text"/>
RB Ref No: (if known)	<input type="text"/>

Address	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
	<input type="text"/>

Nature of illness	<input type="text"/>
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Date of first day's absence from work:	<input type="text"/>
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Expected date of return to work:	<input type="text"/>
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Signature _____

Date _____

If you have any questions, please contact the People Services Team on 029 2034 8200.

To: People Services Team, RBCW, 2 Callaghan Square, Cardiff CF10 5BT
Or email PeopleServices@cinw.org.uk

The Representative Body of the Church in Wales takes Data Protection seriously. Information on how your data is held and how it is processed can be found at:
<https://www.churchinwales.org.uk/privacy-notice>. If you have any queries or require additional information please contact the legal department legal@churchinwales.org.uk or by telephone on 02920348200.

Managing Absence and Incapacity of Clergy**ABSENCE NOTIFICATION AFTER 7 DAYS**

Archdeaconry	
Message received from	
Date and time	
Re: Absence of Name	
Parish	

Reason for absence <i>(please be specific)</i>	
Date on which sickness began	
Likely date of return	
<i>Any other comments</i>	
Signed	
Date	

N.B. Please remind the cleric of the requirement to return a self-certification form to the People Services Team and obtain a Fit Note from their G.P. if the absence is ongoing.

Managing Absence and Incapacity of Clergy

RETURN TO WORK INTERVIEW

Archdeaconry : _____

Name : _____

Parish : _____

(a) What was the reason for the absence? _____

(b) How long was the cleric absent from work? _____ days
(Please state number of days including days off and holidays)

(c) Did the employee comply with the notification procedure? Yes / No
(if no, please state reason(s) and indicate what action has been taken)

(d) Was this absence related to a previous absence? Yes / No
(if yes, please give date / nature of previous absence(s))

(e) Is there any likelihood of a recurrence? Yes / No

(f) Did the cleric seek advice from their Doctor/Consultant? Yes / No

(g) What was the advice?

(h) Does the cleric require further medical treatment?

(i) Did the Doctor / Consultant give any advice in respect of the cleric's work / work pattern?

(j) Are there any underlying problems relating to the absence (*personal, work or domestic*) and can any assistance be given to the cleric by the Archdeacon, Ministry/ Mission Area Leader / Area Dean, Occupational Health or some other agency?

(k) What advice has been given to the cleric?

(l) Is there any further action required?

Signed : _____ Date : _____

Signature of Cleric : _____

ABSENCE STATEMENT

Please complete the following and send it to the address below when you return to work. If you were incapacitated for more than seven days, then please send appropriate medical certificates with this form, if you have not already done so.

Full Name	<input type="text"/>
Employee No: (if known)	<input type="text"/>
RB Ref No: (if known)	<input type="text"/>
Address	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
Nature of illness	<input type="text"/>
Date of first day's absence from work:	<input type="text"/>
Date of return to work:	<input type="text"/>
Signature	<input type="text"/>
Date	<input type="text"/>

If you have any questions, please contact the People Services Team on 029 2034 8200.

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