

Human Resources

**Medical Authorization to Return to Work Form
(from employee health leave)**

Medical authorization to be provided two weeks prior to return to work.

To Be Completed By Employee

Name: *(typed or printed)* _____ Employee ID: _____

Position: _____ Location: _____

To Be Completed By Physician/Health Care Provider

Physician's Name: _____ Phone: _____

Address: _____

Date employee is medically cleared to return to work: _____

- Regular Duty/ No Restrictions
- Modified Duty (explain below)
- Reduced Hours (explain below)
- Hours/Days (if restricted, what Days/Hours Per day)
- No Driving (explain below)
- No Equipment Operation (explain below)
- Work Restrictions (explain below)

Other and/or Explanation from item(s) marked above:

Physician's Signature: _____ Date: _____

Return completed forms to Northshore School District - Human Resources
Address: 3330 Monte Villa Parkway, Bothell WA 98021
Fax: 425-408-7625



How to Submit Medical Authorization to Return to Work.

1. **Download the Medical Authorization to Return to Work** and request the health care provider to complete it.
2. Go to **TalentEd Records** (records.nsd.org). Use your employee credentials.
3. In the left-hand menu, click **Available Forms**.
4. Select **Medical Authorization to Return to Work 2025-26 SY**.

The screenshot shows the Northshore School District TalentEd Records interface. The top navigation bar includes the district logo and user information. The left sidebar contains navigation options: My Tasks, Available Forms (highlighted with a red circle), and Files. The main content area displays a grid of available forms. The form 'Medical Authorization to Return to Work 2025-26 SY' is circled in red, indicating it is the selected form.

5. **Upload the signed document** from healthcare provider and click **SAVE FINAL**.

The screenshot shows the 'Medical Authorization to Return to Work 2025-26 SY' form. The form title is 'Medical Authorization to Return to Work 2025-26 SY'. Below the title, there is a paragraph of text: 'If you have been approved a Medical Leave of Absence, you are required to submit a Medical Authorization to Return to Work form at least two (2) weeks prior to your scheduled return date.' The form is divided into three steps: Step 1 - Download form (with a 'CLICK HERE' link), Step 2 - Complete form (with instructions to have the healthcare provider complete the form), and Step 3 - Submit form (with instructions to submit the completed document in the Attachment section). Below the steps, there is a 'Please note' section: 'Submission of this form is mandatory—without it, you will not be authorized to return to work.' The 'Attachments' section shows a required field for the signed document, with an 'Upload a file' button circled in red. At the bottom of the form, there are buttons for 'Close', 'Print', 'Print as PDF', 'Save Draft', and 'Save Final' (circled in red).