|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Documentation of absence –  Submitted no later than the 3rd day of illness.  To be completed by the employee | | | H:\Skabeloner\Logo\EM-fiberglas logo.jpg | |
| Name: | | | | |
| Employee no.: | | | | |
| I hereby confirm that:  1 I am absent from work due to | | | | |
| sickness  work-related injury | | | | |
| My absence is expected to last:\_\_\_\_\_\_\_\_\_\_ days. | | | | |
|  | | | | |
| Date: | | | | |
|  | |  | Employee’s signature | |

For use by the employer:

|  |
| --- |
|  |
|  |
| Documentation received by the employer on: |

**This declaration is made under penalty of law pursuant to section 279 of the Danish Criminal Code, which concerns fraud. This means that declaring sickness to be the reason for absence if the absence is due to other reasons, is a criminal offence**.