

**ATTACHMENTS**

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