



Notice to Employees



Your employer is registered with and reporting wages to the Employment Development Department (EDD) as required by law. Wages are used for the following benefit programs, which are available to you.

Unemployment Insurance

Funded entirely by employer's taxes

Provides partial wage replacement when you are unemployed or your hours are reduced due to no fault of your own. You must meet all eligibility requirements to receive unemployment benefits.

Visit [File for Unemployment](http://edd.ca.gov/unemployment) (edd.ca.gov/unemployment) to learn how to apply for benefits.

Disability Insurance

Funded entirely by employees' contributions

Provides partial wage replacement when you are unable to work because of a non-work-related illness, injury, pregnancy, or disability. You must meet all eligibility requirements to receive disability benefits.

Visit [Disability Insurance](http://edd.ca.gov/Disability/Disability_Insurance.htm) (edd.ca.gov/Disability/Disability_Insurance.htm) to learn how to apply for benefits.

Paid Family Leave

Funded entirely by employees' contributions

Provides partial wage replacement when you need to take time off work to:

- Care for a seriously ill family member.
- Bond with a new child.
- Participate in a qualifying event because of a family member's military deployment to a foreign country.

Visit [California Paid Family Leave](http://edd.ca.gov/PaidFamilyLeave) (edd.ca.gov/PaidFamilyLeave) to learn how to apply for benefits.

Note: Some employees may be exempt from coverage by the above insurance programs. It is illegal to make a false statement or to withhold facts to claim benefits. For additional information, visit the [EDD](http://edd.ca.gov) (edd.ca.gov).

The EDD is an equal opportunity employer/program. Auxiliary aids and services are available upon request to individuals with disabilities. Requests for services, aids, and/or alternate formats need to be made by calling 1-866-490-8879 (voice). TTY users, please call the California Relay Service at 711.

Notice to Employees



UI

This employer is registered with the Employment Development Department (EDD) as required by the California Unemployment Insurance Code and is reporting wage credits to the EDD that are being accumulated for you to be used as a basis for:

Unemployment Insurance

(funded entirely by employers’ taxes)

Unemployment Insurance (UI) is paid for by your employer and provides partial income replacement when you are unemployed or your hours are reduced due to no fault of your own. To claim UI benefit payments you must also meet all UI eligibility requirements, including that you must be available for work and searching for work.

How to File a New UI Claim

Use one of the following methods:

- **Online:** UI OnlineSM is the fastest and most convenient way to file your UI claim. Visit [UI Online](http://edd.ca.gov/UI_Online) (edd.ca.gov/UI_Online) to get started.
- **Phone:** Representatives are available at the following toll-free numbers, Monday through Friday between **8 a.m. to 12 noon** (Pacific Standard Time) except during state holidays.

English	1-800-300-5616	Cantonese	1-800-547-3506	Vietnamese	1-800-547-2058
Spanish	1-800-326-8937	Mandarin	1-866-303-0706	TTY	1-800-815-9387
- **Fax or Mail:** When accessing UI Online to file a new claim, some customers will be instructed to fax or mail their UI application to the EDD. If this occurs, the *Unemployment Insurance Application* (DE 1101I), will display. For faster and more secure processing, fax the completed form to the number listed on the form. If mailing your UI application, use the address on the form and allow additional time for processing.

Important: Waiting to file your UI claim may delay benefit payments.

DI

Disability Insurance

(funded entirely by employees’ contributions)

Disability Insurance (DI) is funded by employees’ contributions and provides partial wage replacement benefits to eligible Californians who are unable to work due to a non-work-related illness, injury, pregnancy, or disability.

Your employer must provide the *Disability Insurance Provisions* (DE 2515) brochure, to newly hired employees and to each employee who is unable to work due to a non-work-related illness, injury, pregnancy, or disability.

How to File a New DI Claim

Use one of the following methods:

- **Online:** SDI Online is the fastest and most convenient way to file your claim. Visit [SDI Online](http://edd.ca.gov/SDI_Online) (edd.ca.gov/SDI_Online) to get started.
- **Mail:** To file a claim with the EDD by mail, complete and submit a *Claim for Disability Insurance (DI) Benefits* (DE 2501) form. You can obtain a paper claim form from your employer, physician/practitioner, visiting a State Disability Insurance office, online at [EDD Forms and Publications](http://edd.ca.gov/Forms) (edd.ca.gov/Forms), or by calling 1-800-480-3287.

Note: If your employer maintains an approved Voluntary Plan for DI coverage, contact your employer for assistance.

For more information about DI, visit [State Disability Insurance](http://edd.ca.gov/disability) (edd.ca.gov/disability) or call 1-800-480-3287.
State government employees should call 1-866-352-7675.

TTY (for deaf or hearing-impaired individuals only) is available at 1-800-563-2441.

PFL

Paid Family Leave

(funded entirely by employees’ contributions)

Paid Family Leave (PFL) is funded by employees’ contributions and provides partial wage replacement benefits to eligible Californians who need time off work to care for seriously ill child, parent, parent-in-law, grandparent, grandchild, sibling, spouse, or registered domestic partner. Benefits are available to parents who need time off work to bond with a new child entering the family by birth, adoption, or foster care placement. Benefits are also available for eligible Californians who need time off work to participate in a qualifying event resulting from a spouse, registered domestic partner, parent, or child’s military deployment to a foreign country.

Your employer must provide the *Paid Family Leave* (DE 2511) brochure, to newly hired employees and to each employee who is taking time off work to care for a seriously ill family members, to bond with a new child, or to participate in a qualifying military event.

How to File a New PFL Claim

Use one of the following methods:

- **Online:** SDI Online is the fastest and most convenient way to file your claim. Visit [SDI Online](http://edd.ca.gov/SDI_Online) (edd.ca.gov/SDI_Online) to get started.
- **Mail:** To file a claim with the EDD by mail, complete and submit a *Claim for Paid Family Leave (PFL) Benefits* (DE 2501F) form. You can obtain a paper claim form from your employer, a physician/practitioner, visiting a State Disability Insurance office, online at [EDD Forms and Publications](http://edd.ca.gov/Forms) (edd.ca.gov/Forms), or by calling 1-877-238-4373.

Note: If your employer maintains an approved Voluntary Plan for PFL coverage, contact your employer for assistance.

For more information about PFL, visit [State Disability Insurance](http://edd.ca.gov/disability) (edd.ca.gov/disability) or call 1-877-238-4373.

State government employees should call 1-877-945-4747.

TTY (for deaf or hearing-impaired individuals only) is available at 1-800-445-1312.

Note: Some employees may be exempt from coverage by the above insurance programs. It is illegal to make a false statement or to withhold facts to claim benefits. For additional information, visit the [EDD](http://edd.ca.gov) (edd.ca.gov).

NOTICE TO EMPLOYEES UNEMPLOYMENT INSURANCE BENEFITS

This employer is registered under the California Unemployment Insurance Code and is reporting wage credits to the Employment Development Department (EDD) that are being accumulated for you to be used as a basis for Unemployment Insurance benefits.

You may be eligible to receive Unemployment Insurance benefits if you are:

- Unemployed or working less than full-time.
and
- Out of work due to no fault of your own and physically able to work, ready to accept work, and looking for work.

Employees of Educational Institutions:

Unemployment Insurance benefits based on wages earned while employed by a public or nonprofit educational institution may not be paid during a school recess period if the employee has reasonable assurance of returning to work at the end of the recess period (California Unemployment Insurance Code section 1253.3). Benefits based on other covered employment may be payable during recess periods if the unemployed individual is in all other respects eligible, and the wages earned in other covered employment are sufficient to establish an Unemployment Insurance claim after excluding wages earned from a public or nonprofit educational institution(s).

Note: Some employees may be exempt from Unemployment and Disability Insurance coverage.

The fastest way to file for Unemployment Insurance (UI) is with UI Online at www.edd.ca.gov/UI_Online.

You may also file for Unemployment Insurance by calling toll-free from anywhere in the U.S. at:

English	1-800-300-5616	Mandarin	1-866-303-0706
Spanish	1-800-326-8937	Vietnamese	1-800-547-2058
Cantonese	1-800-547-3506	TTY	1-800-815-9387

Note: Waiting to file a claim could delay benefits.

EDD representatives are available Monday through Friday between 8 a.m. and 12 noon (Pacific Time).



Civil Rights
Department
STATE OF CALIFORNIA

CALIFORNIA LAW PROHIBITS WORKPLACE **DISCRIMINATION & HARASSMENT**

The California Civil Rights Department (CRD) enforces laws that protect you from illegal discrimination and harassment in employment based on your actual or perceived:

- **ANCESTRY**
- **AGE** (40 and above)
- **COLOR**
- **DISABILITY** (physical, developmental, mental health/psychiatric, and HIV/AIDS)
- **GENETIC INFORMATION**
- **GENDER EXPRESSION**
- **GENDER IDENTITY**
- **MARITAL STATUS**
- **MEDICAL CONDITION** (genetic characteristics, cancer, or a record or history of cancer)
- **MILITARY OR VETERAN STATUS**
- **NATIONAL ORIGIN** (includes language restrictions and possession of a driver's license issued to undocumented immigrants)
- **RACE** (includes traits associated with race, such as hair texture and hairstyle)
- **RELIGION** (includes religious dress and grooming practices)
- **REPRODUCTIVE HEALTH DECISIONMAKING**
- **SEX/GENDER** (includes pregnancy, childbirth, breastfeeding and/or related medical conditions)
- **SEXUAL ORIENTATION**

CALIFORNIA LAW PROHIBITS WORKPLACE DISCRIMINATION & HARASSMENT



Civil Rights
Department
STATE OF CALIFORNIA

THE FAIR EMPLOYMENT AND HOUSING ACT PROTECTS YOUR CIVIL RIGHTS AT WORK.

HARASSMENT

1. The law prohibits harassment of employees, applicants, unpaid interns, volunteers, and independent contractors by any person. This includes a prohibition against harassment based on any characteristic listed in this poster, including sexual harassment. The law prohibits harassment based on a single protected characteristic or a combination of two or more protected characteristics.
2. All employers must take reasonable steps to prevent all forms of harassment, and they must provide each employee with information about the illegal nature of sexual harassment and available legal remedies.
3. Employers with five or more employees and public employers must train their employees regarding the prevention of sexual harassment, including harassment based on gender identity, gender expression, and sexual orientation.

DISCRIMINATION/REASONABLE ACCOMMODATIONS

1. California law prohibits employers with five or more employees and public employers from discriminating based on any protected characteristic listed in this poster when making decisions about hiring, promotion, pay, benefits, terms of employment, layoffs, and other aspects of employment. The law prohibits discrimination based on a single protected characteristic or a combination of two or more protected characteristics.
2. Employers cannot limit or prohibit the use of any language in any workplace unless justified by business necessity. The employer must notify employees of the language restriction and consequences for violation.
3. Employers cannot discriminate against an applicant or employee because they possess a California driver's license or ID issued to an undocumented person.
4. Employers must reasonably accommodate the religious beliefs and practices of an employee, unpaid intern, or job applicant, including the wearing of clothing, jewelry, and facial or body hair that are part of an individual's observance of their religious beliefs.
5. Employers must reasonably accommodate an employee or job applicant with a disability to enable them to perform the essential functions of a job.
6. Employers cannot discriminate or retaliate against an employee because of their status, or because of their family member's status, as a victim of domestic violence, sexual assault, stalking, and certain other types of violence — as long as the employer knows of this status. Employers must also provide such employees safety-related reasonable accommodations.

ADDITIONAL PROTECTIONS

California law offers additional protections to those who work for employers with five or more employees. Some exceptions may apply. These additional protections include:

1. Specific protections and hiring procedures for people with criminal histories who are looking for employment protections against discrimination based on an employee or job applicant's use of cannabis off the job and away from the workplace

2. Up to 12 weeks of job-protected leave to eligible employees to care for themselves, a family member (child of any age, spouse, domestic partner, parent, parent-in-law, grandparent, grandchild, sibling) or a designated person (with blood or family-like relationship to employee); to bond with a new child; or for certain urgent military needs
3. Up to five days of job-protected bereavement leave within three months of the death of a family member (child, spouse, parent, sibling, grandparent, grandchild, domestic partner, or parent-in-law)
4. Up to four months of job-protected leave to employees disabled because of pregnancy, childbirth, or a related medical condition, as well as the right to reasonable accommodations, on the advice of their health care provider, related to their pregnancy, childbirth, or a related medical condition
5. Up to five days of job-protected leave following a reproductive loss event (failed adoption, failed surrogacy, miscarriage, stillbirth, or unsuccessful assisted reproduction)
6. Protections for an employee who takes time off work to serve on a jury, if they have given reasonable notice to the employer, or to testify in court
7. Protections for an employee who takes time off work to go to court or seek legal relief (such as a restraining order) after they are the victim of a crime or certain types of violence
8. Protections against retaliation when a person opposes, reports, or assists another person to oppose unlawful discrimination, including filing an internal complaint or a complaint with CRD

REMEDIES/FILING A COMPLAINT

1. The law provides remedies for individuals who experience prohibited discrimination, harassment, or retaliation in the workplace. These remedies can include hiring, front pay, back pay, promotion, reinstatement, cease-and-desist orders, expert witness fees, reasonable attorney's fees and costs, punitive damages, and emotional distress damages.
2. If you believe you have experienced discrimination, harassment, or retaliation, you may file a complaint with CRD. Independent contractors and volunteers: If you believe you have been harassed, you may file a complaint with CRD.
3. Complaints must be filed within three years of the last act of discrimination/harassment/retaliation. For those who are under the age of 18, complaints must be filed within three years after the last act of discrimination/harassment/retaliation or one year after their eighteenth birthday, whichever is later.

If you have been subjected to discrimination, harassment, or retaliation at work, file a complaint with the Civil Rights Department (CRD).

TO FILE A COMPLAINT

Civil Rights Department
[calcivilrights.ca.gov/complaintprocess](https://www.calcivilrights.ca.gov/complaintprocess)
Toll Free: 800.884.1684 / TTY: 800.700.2320
California Relay Service (711)

Have a disability that requires a reasonable accommodation?
CRD can assist you with your complaint.

The Fair Employment and Housing Act is codified at Government Code sections 12900 -12999. The regulations implementing the Act are at Code of Regulations, title 2, division 4.1

Government Code section 12950 and California Code of Regulations, title 2, section 11023, require all employers to post this document. It must be conspicuously posted in hiring offices, on employee bulletin boards, in employment agency waiting rooms, union halls, and other places employees gather. Any employer whose workforce at any facility or establishment consists of more than 10% of non-English speaking persons must also post this notice in the appropriate language or languages.



Civil Rights
Department
STATE OF CALIFORNIA

THE RIGHTS OF EMPLOYEES WHO ARE TRANSGENDER OR GENDER NONCONFORMING

CALIFORNIA LAW PROTECTS TRANSGENDER AND GENDER NONCONFORMING PEOPLE FROM DISCRIMINATION, HARASSMENT, AND RETALIATION AT WORK. THESE PROTECTIONS ARE ENFORCED BY THE CIVIL RIGHTS DEPARTMENT (CRD).

THINGS YOU NEED TO KNOW

1. Does California law protect transgender and gender nonconforming employees from employment discrimination?

Yes. All employees, job applicants, unpaid interns, volunteers, and contractors are protected from discrimination at work when based on a protected characteristic, such as their gender identity, gender expression, sexual orientation, race, or national origin. This means that private employers with five or more employees may not, for example, refuse to hire or promote someone because they identify as – or are perceived to identify as – transgender or non-binary, or because they express their gender in non-stereotypical ways.

Employment discrimination can occur at any time during the hiring or employment process. In addition to refusing to hire or promote someone, unlawful discrimination includes discharging an employee, subjecting them to worse working conditions, or unfairly modifying the terms of their employment because of their gender identity or gender expression.

2. Does California law protect transgender and gender nonconforming employees from harassment at work?

Yes. All employers are prohibited from harassing any employee, intern, volunteer, or contractor because of their gender identity or gender expression. For example, an employer can be liable if co-workers create a hostile work environment – whether in person or virtual – for an employee who is undergoing a gender transition. Similarly, an employer can be liable when customers or other third parties harass an employee because of their gender identity or expression, such as intentionally referring to a gender-nonconforming employee by the wrong pronouns or name.

3. Does California law protect employees who complain about discrimination or harassment in the workplace?

Yes. Employers are prohibited from retaliating against any employee who asserts their right under the law to be free from discrimination or harassment. For example, an employer commits unlawful retaliation when it responds to an employee making a discrimination complaint – to their supervisor, human resources staff, or CRD – by cutting their shifts.

4. If bathrooms, showers, and locker rooms are sex-segregated, can employees choose the one that is most appropriate for them?

Yes. All employees have a right to safe and appropriate restroom and locker room facilities. This includes the right to use a restroom or locker room that corresponds to the employee's gender identity, regardless of the employee's sex assigned at birth. In addition, where possible, an employer should provide an easily accessible, gender-neutral (or "all-gender"), single user facility for use by any employee. The use of single stall restrooms

and other facilities should always be a matter of choice. Employees should never be forced to use one, as a matter of policy or due to harassment.

5. Does an employee have the right to be addressed by the name and pronouns that correspond to their gender identity or gender expression, even if different from their legal name and gender?

Yes. Employees have the right to use and be addressed by the name and pronouns that correspond with their gender identity or gender expression. These are sometimes known as "chosen" or "preferred" names and pronouns. For example, an employee does not need to have legally changed their name or birth certificate, nor have undergone any type of gender transition (such as surgery), to use a name and/or pronouns that correspond with their gender identity or gender expression. An employer may be legally obligated to use an employee's legal name in specific employment records, but when no legal obligation compels the use of a legal name, employers and co-workers must respect an employee's chosen name and pronouns. For example, some businesses utilize software for payroll and other administrative purposes, such as creating work schedules or generating virtual profiles. While it may be appropriate for the business to use a transgender employee's legal name for payroll purposes when legally required, refusing or failing to use that person's chosen name and pronouns, if different from their legal name, on a shift schedule, nametag, instant messaging account, or work ID card could be harassing or discriminatory. CRD recommends that employers take care to ensure that each employee's chosen name and pronouns are respected to the greatest extent allowed by law.

6. Does an employee have the right to dress in a way that corresponds with their gender identity and gender expression?

Yes. An employer who imposes a dress code must enforce it in a non-discriminatory manner. This means that each employee must be allowed to dress in accordance with their gender identity and expression. While an employer may establish a dress code or grooming policy in accord with business necessity, all employees must be held to the same standard, regardless of their gender identity or expression.

7. Can an employer ask an applicant about their sex assigned at birth or gender identity in an interview?

No. Employers may ask non-discriminatory questions, such as inquiring about an applicant's employment history or asking for professional references. But an interviewer should not ask questions designed to detect a person's gender identity or gender transition history such as asking about why the person changed their name. Employers should also not ask questions about a person's body or whether they plan to have surgery.

Want to learn more?

Visit: <https://bit.ly/3hTG1EO>

TO FILE A COMPLAINT

Civil Rights Department

calcivilrights.ca.gov/complaintprocess

Toll Free: 800.884.1684 / TTY: 800.700.2320

California Relay Service (711)

Have a disability that requires a reasonable accommodation?
CRD can assist you with your complaint.

YOUR RIGHTS AND OBLIGATIONS AS A PREGNANT EMPLOYEE



Civil Rights
Department
STATE OF CALIFORNIA

IF YOU ARE PREGNANT, HAVE A PREGNANCY-RELATED MEDICAL CONDITION, OR ARE RECOVERING FROM CHILDBIRTH, PLEASE READ THIS NOTICE.

OBLIGATIONS OF EMPLOYERS WITH FIVE OR MORE EMPLOYEES

- Reasonably accommodate your medical needs related to pregnancy, childbirth, or related conditions (such as temporarily modifying your work duties, providing you with a stool or chair, or allowing more frequent breaks);
- Transfer you to a less strenuous or hazardous position (if one is available) or duties if medically needed because of your pregnancy;
- Provide you with pregnancy disability leave (PDL) of up to four months (the working days you normally would work in one-third of a year or 17 1/3 weeks) and return you to your same job when you are no longer disabled by your pregnancy or, in certain instances, to a comparable job. Taking PDL does not protect you from non-leave related employment actions, such as a layoff;
- Provide a reasonable amount of break time and use of a room or other location close to the employee's work area to express breast milk in private as set forth in the Labor Code; and
- Never discriminate, harass, or retaliate on the basis of pregnancy.
Employers with one or more employees must not harass employees on the basis of pregnancy.

PREGNANCY DISABILITY LEAVE

- Although PDL can last up to four months, you are entitled to take PDL only for the period of time during which you are disabled by pregnancy, a pregnancy-related medical condition, or childbirth. Your health care provider determines how much time you need.
- After you inform your employer that you need to take PDL, your employer must guarantee in writing that you can return to work in your same or a comparable position if you request a written guarantee.
- Your employer may require you to submit written medical certification from your health care provider supporting the need for your leave.
- PDL may include, but is not limited to, additional or more frequent breaks, time for prenatal or postnatal medical appointments, and doctor-ordered bed rest, and covers conditions such as severe morning sickness, gestational diabetes, pregnancy-induced hypertension, preeclampsia, recovery from childbirth or loss or end of pregnancy and/or post-partum depression.
- PDL does not need to be taken all at once but can be taken on an as-needed basis as required by your health care provider, including intermittent leave or a reduced work schedule.
- Your leave will be paid or unpaid depending on your employer's policy for other types of medical leave. You may also be eligible for state disability insurance, administered by the California Employment Development Department.
- You may choose to use any vacation or other paid time off during your PDL.
- Your employer may require or you may choose to use any available sick leave during your PDL.
- Your employer is required to continue your group health coverage during your PDL at the same level and under the same conditions that coverage would have been provided if you had continued in employment continuously for the duration of your leave.
- Taking PDL may impact certain benefits and your seniority date; please contact your employer for details.

YOUR OBLIGATIONS AS AN EMPLOYEE

- Give your employer reasonable notice. To receive a reasonable accommodation, obtain a transfer, or take PDL, you must give your employer sufficient notice for your employer to make appropriate plans. Sufficient notice means 30 days advance notice if the need for the reasonable accommodation, transfer, or PDL is foreseeable, or as soon as practicable if the need is an emergency or unforeseeable.
- Provide a written medical certification from your health care provider. Except in a medical emergency where there is no time to obtain it, your employer may require you to provide a written medical certification from your health care provider of the medical need for your reasonable accommodation, transfer, or PDL. If the need is an emergency or unforeseeable, you must provide this certification within the time frame your employer requests, unless it is not practicable for you to do so under the circumstances despite your diligent, good faith efforts. *Your employer must give you at least 15 calendar days to submit the certification.* Ask if your employer has a copy of a medical certification form for your health care provider to complete.
- If you do not give your employer notice or written medical certification of your medical need (if required), either in advance or as soon as practicable, your employer may be justified in delaying your reasonable accommodation, transfer, or PDL.

ADDITIONAL LEAVE UNDER THE CALIFORNIA FAMILY RIGHTS ACT (CFRA)

Under CFRA you may have a right to take family care or medical leave (CFRA leave) to bond with a new child. If you gave birth to the child, you would generally take CFRA bonding leave after taking PDL. CFRA leave may be up to 12 workweeks in a 12-month period for the birth, adoption, or foster care placement of your child*. You must take it within one year of these events.

In addition to taking leave to bond with a new child, you can also take CFRA leave because of your own serious health condition (not related to pregnancy) or that of your child, parent**, spouse, domestic partner, grandparent, grandchild, sibling, or "designated person" related by blood or with whom you have a family-like relationship.

You are eligible for CFRA leave if you have more than 12 months of service with an employer, have worked at least 1,250 hours in the 12-month period before the date you want to begin your leave, and your employer has five or more employees.

Your employer may, but is not required to, pay you while you are out on CFRA leave, but they must allow you to use any accrued paid time-off while on CFRA leave. You may also be eligible for benefits administered by the Employment Development Department, including state disability insurance (for your own health condition) or Paid Family Leave (for bonding with a new child or for caring for a family member with a serious health condition). For more information, visit edd.ca.gov/disability

If you are improperly denied pregnancy or childbirth-related reasonable accommodations or protected leave under PDL or CFRA, file a complaint with the Civil Rights Department (CRD).

TO FILE A COMPLAINT

calcivilrights.ca.gov/complaintprocess

Toll Free: 800.884.1684 / TTY: 800.700.2320

California Relay Service (711)

Have a disability that requires a reasonable accommodation? CRD can assist you with your complaint.

For translations of this poster, visit:

www.cacivilrights.ca.gov/posters/required

*"Child" means a biological, adopted, or foster child, a stepchild, a legal ward, or a child of an employee or the employee's domestic partner, or a person to whom the employee stands in loco parentis (in place of a parent).

**"Parent" includes a biological, foster, or adoptive parent, a parent-in-law, a stepparent, a legal guardian, or other person who stood in loco parentis to the employee when the employee was a child.

FAMILY CARE & MEDICAL LEAVE & PREGNANCY DISABILITY LEAVE



Civil Rights
Department
STATE OF CALIFORNIA



Under California law, an employee may have the right to take job-protected leave to care for their own serious health condition or a family member with a serious health condition, or to bond with a new child (via birth, adoption, or foster care). California law also requires employers to provide job-protected leave and accommodations to employees who are disabled by pregnancy, childbirth, or a related medical condition.

Under the California Family Rights Act of 1993 (CFRA), many employees have the right to take job-protected leave, which is leave that will allow them to return to their job or a similar job after their leave ends. This leave may be up to 12 work weeks in a 12-month period for:

- The employee's own serious health condition
- The serious health condition of a child, spouse, domestic partner, parent, parent-in-law, grandparent, grandchild, sibling, or someone else with a blood or family-like relationship with the employee ("designated person")
- The birth, adoption, or foster care placement of a child

If an employee takes leave for their own or a family member's serious health condition, leave may be taken on an intermittent or reduced work schedule when medically necessary, among other circumstances.

Eligibility. To be eligible for CFRA leave, an employee must have more than 12 months of service with their employer, have worked at least 1,250 hours in the 12-month period before the date they want to begin their leave, and their employer must have five or more employees.

Pay and Benefits During Leave. While the law guarantees only unpaid leave, some employers pay their employees during CFRA leave. In addition, employees may choose (or employers may require) use of accrued paid leave while taking CFRA leave in certain circumstances. Employees on CFRA leave may also be eligible for benefits administered by the Employment Development Department, including Paid Family Leave. For more information, visit bit.ly/EDD-PFL.

Taking CFRA leave may impact certain employee benefits and an employee's seniority date. If employees want more information regarding eligibility for leave and/or the impact of the leave on seniority and benefits, they should contact their employer.

Pregnancy Disability Leave. When an employee is disabled by pregnancy, childbirth, or a related medical condition, the employee is entitled to take a pregnancy disability leave of up to four months, depending on their period(s) of actual disability. If the employee is also eligible for CFRA leave, they have the right to take both pregnancy disability leave and CFRA leave related to the birth of their child.

Reinstatement. Both CFRA leave and pregnancy disability leave guarantee reinstatement to the same position or, in certain instances, a comparable position at the end of the leave, subject to any defense allowed under the law.

Notice. When possible, employees must provide 30 days' advance notice before taking leave for foreseeable event, such as the expected the birth of a child or a planned medical procedure. For unforeseeable events, employees should notify their employers, at least verbally, as soon as they learn of the need for the leave. Failing to provide notice is grounds for, and may result in, deferral of the requested leave until the employee complies with this notice policy.

Certification. Employers may require certification from an employee's health care provider before allowing leave for pregnancy disability or for the employee's own serious health condition. Employers may also require certification from the health care provider of the employee's family member, including a designated person, who has a serious health condition, before granting leave to take care of that family member.

Want to learn more?

Visit: calcivilrights.ca.gov/family-medical-pregnancy-leave/

If you have been subjected to discrimination, harassment, or retaliation at work, or have been improperly denied protected leave, file a complaint with the Civil Rights Department (CRD).

TO FILE A COMPLAINT

Civil Rights Department
calcivilrights.ca.gov/complaintprocess

Toll Free: 800.884.1684 / TTY: 800.700.2320

California Relay Service (711)

Have a disability that requires a reasonable accommodation? CRD can assist you with your complaint.



CALIFORNIA LAW PROHIBITS WORKPLACE DISCRIMINATION AND HARASSMENT

THE CALIFORNIA DEPARTMENT OF FAIR EMPLOYMENT AND HOUSING (DFEH) ENFORCES LAWS THAT PROTECT YOU FROM ILLEGAL DISCRIMINATION AND HARASSMENT IN EMPLOYMENT BASED ON YOUR ACTUAL OR PERCEIVED:

- ANCESTRY
- AGE (40 and above)
- COLOR
- DISABILITY (physical and mental, including HIV and AIDS)
- GENETIC INFORMATION
- GENDER IDENTITY, GENDER EXPRESSION
- MARITAL STATUS
- MEDICAL CONDITION (genetic characteristics, cancer or a record or history of cancer)
- MILITARY OR VETERAN STATUS
- NATIONAL ORIGIN (includes language use and possession of a driver's license issued to persons unable to prove their presence in the United States is authorized under federal law)
- RACE
- RELIGION (includes religious dress and grooming practices)
- SEX/GENDER (includes pregnancy, childbirth, breastfeeding and/or related medical conditions)
- SEXUAL ORIENTATION

THE CALIFORNIA FAIR EMPLOYMENT AND HOUSING ACT (GOVERNMENT CODE SECTIONS 12900 THROUGH 12996) AND ITS IMPLEMENTING REGULATIONS (CALIFORNIA CODE OF REGULATIONS, TITLE 2, SECTIONS 11000 THROUGH 11141):

- ① Prohibit harassment of employees, applicants, unpaid interns, volunteers, and independent contractors by any persons and require employers to take all reasonable steps to prevent harassment. This includes a prohibition against sexual harassment, gender harassment, harassment based on pregnancy, childbirth, breastfeeding and/or related medical conditions, as well as harassment based on all other characteristics listed above.
- ② Require that all employers provide information to each of their employees on the nature, illegality, and legal remedies that apply to sexual harassment. Employers may either develop their own publications, which must meet standards set forth in California Government Code section 12950, or use a brochure from DFEH.
- ③ Require employers with 5 or more employees and all public entities to provide training for all employees regarding the prevention of sexual harassment, including harassment based on gender identity, gender expression, and sexual orientation.
- ④ Prohibit employers from limiting or prohibiting the use of any language in any workplace unless justified by business necessity. The employer must notify employees of the language restriction and consequences for violation. Also prohibits employers from discriminating against an applicant or employee because they possess a driver's license issued to a person who is unable to prove that their presence in the United States is authorized under federal law.
- ⑤ Require employers to reasonably accommodate an employee, unpaid intern, or job applicant's religious beliefs and practices, including the wearing or carrying of religious clothing, jewelry or artifacts, and hair styles, facial hair, or body hair, which are part of an individual's observance of their religious beliefs.

- ⑥ Require employers to reasonably accommodate employees or job applicants with disabilities to enable them to perform the essential functions of a job.
- ⑦ Permit job applicants, unpaid interns, volunteers, and employees to file complaints with DFEH against an employer, employment agency, or labor union that fails to grant equal employment as required by law.
- ⑧ Prohibit discrimination against any job applicant, unpaid intern, or employee in hiring, promotions, assignments, termination, or any term, condition, or privilege of employment.
- ⑨ Require employers, employment agencies, and unions to preserve applications, personnel records, and employment referral records for a minimum of two years.
- ⑩ Require employers to provide leaves of up to four months to employees disabled because of pregnancy, childbirth, or a related medical condition.
- ⑪ Require an employer to provide reasonable accommodations requested by an employee, on the advice of their health care provider, related to their pregnancy, childbirth, or a related medical condition.
- ⑫ Require employers of 20 or more persons to allow eligible employees to take up to 12 weeks leave in a 12-month period for the birth of a child or the placement of a child for adoption or foster care; also require employers of 50 or more persons to allow eligible employees to take up to 12 weeks leave in a 12-month period for an employee's own serious health condition or to care for a parent, spouse, or child with a serious health condition.
- ⑬ Require employment agencies to serve all applicants equally, refuse discriminatory job orders, and prohibit employers and employment agencies from making discriminatory pre-hiring inquiries or publishing help-wanted advertisements that express a discriminatory hiring preference.
- ⑭ Prohibit unions from discriminating in member admissions or dispatching members to jobs.
- ⑮ Prohibit retaliation against a person who opposes, reports, or assists another person to oppose unlawful discrimination.

FILING A COMPLAINT

The law provides for remedies for individuals who experience prohibited discrimination or harassment in the workplace. These remedies include hiring, front pay, back pay, promotion, reinstatement, cease-and-desist orders, expert witness fees, reasonable attorney's fees and costs, punitive damages, and emotional distress damages.

Job applicants, unpaid interns, and employees: If you believe you have experienced discrimination or harassment you may file a complaint with DFEH. Independent contractors and volunteers: If you believe you have been harassed, you may file a complaint with DFEH.

Complaints must be filed within one year of the last act of discrimination/harassment or, for victims who are under the age of 18, not later than one year after the victim's eighteenth birthday.

If you have a disability that prevents you from submitting a written intake form on-line, by mail, or email, DFEH can assist you by scribing your intake by phone or, for individuals who are Deaf or Hard of Hearing or have speech disabilities, through the California Relay Service (711), or call us through your VRS at (800) 884-1684 (voice).

To schedule an appointment, contact the Communication Center at (800) 884-1684 (voice or via relay operator 711) or (800) 700-2320 (TTY) or by email at contact.center@dfeh.ca.gov.

DFEH is committed to providing access to our materials in an alternative format as a reasonable accommodation for people with disabilities when requested.

Contact DFEH at
(800) 884-1684
(voice or via relay operator 711),
TTY (800) 700-2320,
or contact.center@dfeh.ca.gov
to discuss your preferred format to access our materials or webpages.

DFEH-E07P-ENG / December 2018

FOR MORE INFORMATION

Department of Fair Employment
and Housing

Toll Free: (800) 884-1684

TTY: (800) 700-2320

Online: www.dfeh.ca.gov

Also find us on:



Government Code section 12950 and California Code of Regulations, title 2, section 11013, require all employers to post this document. It must be conspicuously posted in hiring offices, on employee bulletin boards, in employment agency waiting rooms, union halls, and other places employees gather. Any employer whose workforce at any facility or establishment consists of more than 10% of non-English speaking persons must also post this notice in the appropriate language or languages.

OFFICIAL NOTICE

Amends General
Minimum Wage
Order and IWC
Industry and
Occupation Orders



California Minimum Wage

MW-2025

Every employer, regardless of the number of employees, shall pay to each employee wages not less than the following:

Effective January 1, 2025, Minimum Wage: \$16.50 per hour *See Sec. 2 below
Effective January 1, 2024, Minimum Wage: \$16.00 per hour
Effective January 1, 2023, Minimum Wage: \$15.50 per hour

PREVIOUS YEARS

EFFECTIVE DATE	Employers with 25 or Fewer Employees*	Employers with 26 or More Employees *
January 1, 2022	\$14.00	\$15.00

*Employees treated as employed by a single qualified taxpayer pursuant to Revenue and Taxation Code section 23626 are treated as employees of that single taxpayer. To employers and representatives of persons working in industries and occupations in the State of California:

SUMMARY OF ACTIONS

TAKE NOTICE that on April 4, 2016, the Governor of California signed legislation passed by the California Legislature, raising the minimum wage for all industries. (SB 3, Stats. of 2016, amending section 1182.12. of the California Labor Code.) and, in 2023, raised the minimum wage payable by certain Fast Food Restaurant employers (AB 1228, Stats. 2023) and Healthcare Facility employers (SB 525, Stats. 2023; SB 828, Stats. 2024; and SB 159, Stats. 2024). Pursuant to its authority under Labor Code section 1182.13, the Department of Industrial Relations amends and republishes Sections 2, 3, and 5 of the General Minimum Wage Order, MW-2025. Section 1, Applicability, and Section 4, Separability, have not been changed. Consistent with these enactments, amendments are made to the minimum wage, and the meals and lodging credits sections of all of the IWC's industry and occupation orders.

This summary must be made available to employees in accordance with the IWC's wage orders. Copies of the full text of the amended wage orders may be obtained by downloading online at <https://www.dir.ca.gov/iwc/WageOrderIndustries.htm> or by contacting your local Division of Labor Standards Enforcement office.

1. APPLICABILITY

The provisions of this Order shall not apply to outside salespersons and individuals who are the parent, spouse, or children of the employer previously contained in this Order and the IWC's industry and occupation orders. Exceptions and modifications provided by statute or in Section 1, Applicability, and in other sections of the IWC's industry and occupation orders may be used where such provisions are enforceable and applicable to the employer.

2. MINIMUM WAGES

Every employer shall pay to each employee wages not less than those stated above, on each effective date, per hour for all hours worked, except the following who shall pay no less than the specified minimum wage to each employee: Fast Food Restaurant employers under Part 4.5.5, of Division 2 of the Labor Code (commencing with Labor Code section 1474), effective April 1, 2024; and Healthcare Facility employers under Labor Code section 1182.14, effective October 16, 2024. Note: Supplements to this order containing minimum wage rates applicable for Fast Food Restaurant and Healthcare Facility employees, respectively, are available online at the website address in the Summary of Actions above.

3. MEALS AND LODGING CREDITS - TABLE

When credit for meals or lodging is used to meet part of the employer's minimum wage obligation, the amounts so credited pursuant to a voluntary written agreement may not be more than the following:

EFFECTIVE:	JANUARY 1, 2022		JANUARY 1, 2023	JANUARY 1, 2024	JANUARY 1, 2025
For an employer who employs:	26 or More Employees	25 or Fewer Employees	All Employers regardless of number of Employees	All Employers regardless of number of Employees	All Employers regardless of number of Employees
LODGING					
Room occupied alone	\$70.53 /week	\$65.83 /week	\$72.88 /week	\$75.23 /week	\$77.58 /week
Room shared	\$58.22 /week	\$54.34 /week	\$60.16 /week	\$62.10 /week	\$64.04 /week
Apartment – two thirds (2/3) of the ordinary rental value, and in no event more than:	\$847.12 /month	\$790.67 /month	\$875.33 /month	\$903.60 /month	\$931.88 /month
Where a couple are both employed by the employer, two thirds (2/3) of the ordinary rental value, and in no event more than:	\$1,253.10 /month	\$1,169.59 /month	\$1,294.83 /month	\$1,336.65 /month	\$1,378.49 /month
Breakfast	\$5.42	\$5.06	\$5.60	\$5.78	\$5.96
Lunch	\$7.47	\$6.97	\$7.72	\$7.97	\$8.22
Dinner	\$10.02	\$9.35	\$10.35	\$10.68	\$11.01

Meals or lodging may not be credited against the minimum wage without a voluntary written agreement between the employer and the employee. When credit for meals or lodging is used to meet part of the employer's minimum wage obligation, the amounts so credited may not be more than the amounts stated in the table above.

4. SEPARABILITY

If the application of any provision of this Order, or any section, subsection, subdivision, sentence, clause, phrase, word or portion of this Order should be held invalid, unconstitutional, unauthorized, or prohibited by statute, the remaining provisions thereof shall not be affected thereby, but shall continue to be given full force and effect as if the part so held invalid or unconstitutional had not been included herein.

5. AMENDED PROVISIONS

This Order amends the minimum wage and meals and lodging credits in MW-2024, as well as in the IWC's industry and occupation orders. (See Orders 1-15, Secs. 4 and 10; and Order 16, Secs. 4 and 9.) This Order makes no other changes to the IWC's industry and occupation orders.

These Amendments to the Wage Orders shall be in effect as of January 1, 2025.

Questions about enforcement should be directed to the Labor Commissioner's Office. For the address and telephone number of the office nearest you, information can be found on the internet at www.dir.ca.gov/DLSE/dlse.html or under a search for "California Labor Commissioner's Office" on the internet or any other directory. The Labor Commissioner has offices in the following cities: Bakersfield, El Centro, Fresno, Long Beach, Los Angeles, Oakland, Redding, Sacramento, Salinas, San Bernardino, San Diego, San Francisco, San Jose, Santa Ana, Santa Barbara, Santa Rosa, Stockton, and Van Nuys.



Notice to Employees--Injuries Caused By Work

You may be entitled to workers' compensation benefits if you are injured or become ill because of your job. Workers' compensation covers most work-related physical or mental injuries and illnesses. An injury or illness can be caused by one event (such as hurting your back in a fall) or by repeated exposures (such as hurting your wrist from doing the same motion over and over).

Benefits. Workers' compensation benefits include:

- **Medical Care:** Doctor visits, hospital services, physical therapy, lab tests, x-rays, medicines, medical equipment and travel costs that are reasonably necessary to treat your injury. You should never see a bill. There are limits on chiropractic, physical therapy and occupational therapy visits.
- **Temporary Disability (TD) Benefits:** Payments if you lose wages while recovering. For most injuries, TD benefits may not be paid for more than 104 weeks within five years from the date of injury.
- **Permanent Disability (PD) Benefits:** Payments if you do not recover completely and your injury causes a permanent loss of physical or mental function that a doctor can measure.
- **Supplemental Job Displacement Benefit:** A nontransferable voucher, if you are injured on or after 1/1/2004, your injury causes permanent disability, and your employer does not offer you regular, modified, or alternative work.
- **Death Benefits:** Paid to your dependents if you die from a work-related injury or illness.

Naming Your Own Physician Before Injury or Illness (Predesignation). You may be able to choose the doctor who will treat you for a job injury or illness. If eligible, you must tell your employer, in writing, the name and address of your personal physician or medical group *before* you are injured. You must obtain their agreement to treat you for your work injury. For instructions, see the written information about workers' compensation that your employer is required to give to new employees.

If You Get Hurt:

1. **Get Medical Care.** If you need emergency care, call 911 for help immediately from the hospital, ambulance, fire department or police department. If you need first aid, contact your employer.
2. **Report Your Injury.** Report the injury immediately to your supervisor or to an employer representative. Don't delay. There are time limits. If you wait too long, you may lose your right to benefits. Your employer is required to provide you with a claim form within one working day after learning about your injury. Within one working day after you file a claim form, your employer or claims administrator must authorize the provision of all treatment, up to ten thousand dollars, consistent with the applicable treatment guidelines, for your alleged injury until the claim is accepted or rejected.
3. **See Your Primary Treating Physician (PTP).** This is the doctor with overall responsibility for treating your injury or illness.
 - If you predesignated your personal physician or a medical group, you may see your personal physician or the medical group after you are injured.
 - If your employer is using a medical provider network (MPN) or a health care organization (HCO), in most cases you will be treated within the MPN or HCO unless you predesignated a personal physician or medical group. An MPN is a group of physicians and health care providers who provide treatment to workers injured on the job. You should receive information from your employer if you are covered by an HCO or a MPN. Contact your employer for more information.
 - If your employer is not using an MPN or HCO, in most cases the claims administrator can choose the doctor who first treats you when you are injured, unless you predesignated a personal physician or medical group.
4. You may consult a licensed attorney to advise you of your rights under workers' compensation laws. In most instances, attorney's fees will be paid from your recovery.
5. **Medical Provider Networks.** Your employer may be using an MPN, which is a group of health care providers designated to provide treatment to workers injured on the job. If you have predesignated a personal physician or medical group prior to your work injury, then you may go there to receive treatment from your predesignated doctor. If you are treating with a non-MPN doctor for an existing injury, you may be required to change to a doctor within the MPN. For more information, see the MPN contact information below:

MPN website:

MPN Effective Date: MPN Identification number:

If you need help locating an MPN physician, call your MPN access assistant at:

If you have questions about the MPN or want to file a complaint against the MPN, call the MPN Contact Person at:

Discrimination. It is illegal for your employer to punish or fire you for having a work injury or illness, for filing a claim, or testifying in another person's workers' compensation case. If proven, you may receive lost wages, job reinstatement, increased benefits, and costs and expenses up to limits set by the state.

Questions? Learn more about workers' compensation by reading the information that your employer is required to give you at time of hire. If you have questions, see your employer or the claims administrator (who handles workers' compensation claims for your employer):

Claims Administrator	Phone
Workers' compensation insurer	(Enter "self-insured" if appropriate)

You can also get free information from a State Division of Workers' Compensation Information (DWC) & Assistance Officer. The nearest Information & Assistance Officer can be found at location: or by calling toll-free (800) 736-7401. Learn more information about workers' compensation online: www.dwc.ca.gov and access a useful booklet "Workers' Compensation in California: A Guidebook for Injured Workers."

False claims and false denials. Any person who makes or causes to be made any knowingly false or fraudulent material statement or material representation for the purpose of obtaining or denying workers' compensation benefits or payments is guilty of a felony and may be fined and imprisoned.

Your employer may not be liable for the payment of workers' compensation benefits for any injury that arises from your voluntary participation in any **off-duty, recreational, social, or athletic activity** that is not part of your work-related duties.



Aviso a los Empleados—Lesiones Causadas por el Trabajo

Es posible que usted tenga derecho a beneficios de compensación de trabajadores si usted se lesiona o se enferma a causa de su trabajo. La compensación de trabajadores cubre la mayoría de las lesiones y enfermedades físicas o mentales relacionadas con el trabajo. Una lesión o enfermedad puede ser causada por un evento (como por ejemplo lastimarse la espalda en una caída) o por acciones repetidas (como por ejemplo lastimarse la muñeca por hacer el mismo movimiento una y otra vez).

Beneficios. Los beneficios de compensación de trabajadores incluyen:

- **Atención Médica:** Consultas médicas, servicios de hospital, terapia física, análisis de laboratorio, radiografías, medicinas, equipo médico y costos de viajar que son razonablemente necesarias para tratar su lesión. Usted nunca deberá ver un cobro. Hay límites para visitas quiroprácticas, de terapia física y de terapia ocupacional.
- **Beneficios por Incapacidad Temporal (TD):** Pagos si usted pierde sueldo mientras se recupera. Para la mayoría de las lesiones, beneficios de TD no se pagarán por más de 104 semanas dentro de cinco años después de la fecha de la lesión.
- **Beneficios por Incapacidad Permanente (PD):** Pagos si usted no se recupera completamente y si su lesión le causa una pérdida permanente de su función física o mental que un médico puede medir.
- **Beneficio Suplementario por Desplazamiento de Trabajo:** Un vale no-transferible si su lesión surge en o después del 1/1/04, y su lesión le ocasiona una incapacidad permanente, y su empleador no le ofrece a usted un trabajo regular, modificado, o alternativo.
- **Beneficios por Muerte:** Pagados a sus dependientes si usted muere a causa de una lesión o enfermedad relacionada con el trabajo.

Designación de su Propio Médico Antes de una Lesión o Enfermedad (Designación previa). Es posible que usted pueda elegir al médico que le atenderá en una lesión o enfermedad relacionada con el trabajo. Si elegible, usted debe informarle al empleador, por escrito, el nombre y la dirección de su médico personal o grupo médico, *antes* de que usted se lesione. Usted debe de ponerse de acuerdo con su médico para que atienda la lesión causada por el trabajo. Para instrucciones, vea la información escrita sobre la compensación de trabajadores que se le exige a su empleador darle a los empleados nuevos.

Si Usted se Lastima:

1. **Obtenga Atención Médica.** Si usted necesita atención de emergencia, llame al 911 para ayuda inmediata de un hospital, una ambulancia, el departamento de bomberos o departamento de policía. Si usted necesita primeros auxilios, comuníquese con su empleador.
2. **Reporte su Lesión.** Reporte la lesión inmediatamente a su supervisor(a) o a un representante del empleador. No se demore. Hay límites de tiempo. Si usted espera demasiado, es posible que usted pierda su derecho a beneficios. Su empleador está obligado a proporcionarle un formulario de reclamo dentro de un día laboral después de saber de su lesión. Dentro de un día después de que usted presente un formulario de reclamo, el empleador o administrador de reclamos debe autorizar todo tratamiento médico, hasta diez mil dólares, de acuerdo con las pautas de tratamiento aplicables a su presunta lesión, hasta que el reclamo sea aceptado o rechazado.
3. **Consulte al Médico que le está Atendiendo (PTP).** Este es el médico con la responsabilidad total de tratar su lesión o enfermedad.
 - Si usted designó previamente a su médico personal o grupo médico, usted puede consultar a su médico personal o grupo médico después de lesionarse.
 - Si su empleador está utilizando una Red de Proveedores Médicos (MPN) o una Organización de Cuidado Médico (HCO), en la mayoría de los casos usted será tratado dentro de la MPN o la HCO a menos que usted designó previamente un médico personal o grupo médico. Una MPN es un grupo de médicos y proveedores de atención médica que proporcionan tratamiento a trabajadores lesionados en el trabajo. Usted debe recibir información de su empleador si está cubierto por una HCO o una MPN. Hable con su empleador para más información.
 - Si su empleador no está utilizando una MPN o HCO, en la mayoría de los casos el administrador de reclamos puede escoger el médico que lo atiende primero, cuando usted se lesiona, a menos que usted designó previamente a un médico personal o grupo médico.
4. Puede consultar a un abogado con licencia para que le asesore sobre sus derechos bajo las leyes de compensación para trabajadores. En la mayoría de los casos, los honorarios del abogado se pagarán a partir de su recuperación.
5. **Red de Proveedores Médicos (MPN):** Es posible que su empleador use una MPN, lo cual es un grupo de proveedores de asistencia médica designados para dar tratamiento a los trabajadores lesionados en el trabajo. **Si usted ha hecho una designación previa de un médico personal antes de lesionarse en el trabajo, entonces usted puede recibir tratamiento de su médico previamente designado.** Si usted está recibiendo tratamiento de parte de un médico que no pertenece a la MPN para una lesión existente, puede requerirse que usted se cambie a un médico dentro de la MPN. Para más información, vea la siguiente información de contacto de la MPN :

Página web de la MPN:

Fecha de vigencia de la MPN:

Número de identificación de la MPN:

Si usted necesita ayuda en localizar un médico de una MPN, llame a su asistente de acceso de la MPN al:

Si usted tiene preguntas sobre la MPN o quiere presentar una queja en contra de la MPN, llame a la Persona de Contacto de la MPN al:

Discriminación. Es ilegal que su empleador le castigue o despidan por sufrir una lesión o enfermedad en el trabajo, por presentar un reclamo o por testificar en el caso de compensación de trabajadores de otra persona. De ser probado, usted puede recibir pagos por pérdida de sueldos, reposición del trabajo, aumento de beneficios y gastos hasta los límites establecidos por el estado.

¿Preguntas? Aprenda más sobre la compensación de trabajadores leyendo la información que se requiere que su empleador le dé cuando es contratado. Si usted tiene preguntas, vea a su empleador o al administrador de reclamos (que se encarga de los reclamos de compensación de trabajadores de su empleador):

Administrador de Reclamos

Teléfono

Asegurador del Seguro de Compensación de trabajador

(Anoté “autoasegurado” si es apropiado)

Usted también puede obtener información gratuita de un Oficial de Información y Asistencia de la División Estatal de Compensación de Trabajadores. El Oficial de Información y Asistencia más cercano se localiza en:

o llamando al número gratuito **(800) 736-7401**. Usted puede obtener más información sobre la compensación del trabajador en el Internet en: **www.dwc.ca.gov** y acceder a una guía útil “Compensación del Trabajador de California Una Guía para Trabajadores Lesionados.”

Los reclamos falsos y rechazos falsos del reclamo. Cualquier persona que haga o que ocasione que se haga una declaración o una representación material intencionalmente falsa o fraudulenta, con el fin de obtener o negar beneficios o pagos de compensación de trabajadores, es culpable de un delito grave y puede ser multado y encarcelado.

Es posible que su empleador no sea responsable por el pago de beneficios de compensación de trabajadores para ninguna lesión que proviene de su participación voluntaria en cualquier **actividad fuera del trabajo, recreativa, social, o atlética** que no sea parte de sus deberes laborales.



STATE OF CALIFORNIA – DEPARTMENT OF INDUSTRIAL RELATIONS
Division of Workers' Compensation

Notice to Employees – Injuries Caused By Work

You may be entitled to workers' compensation benefits if you are injured or become ill because of your job. Workers' compensation covers most work-related physical or mental injuries and illnesses. An injury or illness can be caused by one event (such as hurting your back in a fall) or by repeated exposures (such as hurting your wrist from doing the same motion over and over).

Benefits. Workers' compensation benefits include:

- **Medical Care:** Doctor visits, hospital services, physical therapy, lab tests, x-rays, medicines, medical equipment and travel costs that are reasonably necessary to treat your injury. You should never see a bill. There are limits on chiropractic, physical therapy and occupational therapy visits.
- **Temporary Disability (TD) Benefits:** Payments if you lose wages while recovering. For most injuries, TD benefits may not be paid for more than 104 weeks within five years from the date of injury.
- **Permanent Disability (PD) Benefits:** Payments if you do not recover completely and your injury causes a permanent loss of physical or mental function that a doctor can measure.
- **Supplemental Job Displacement Benefit:** A nontransferable voucher, if you are injured on or after 1/1/2004, your injury causes permanent disability, and your employer does not offer you regular, modified, or alternative work.
- **Death Benefits:** Paid to your dependents if you die from a work-related injury or illness.

Naming Your Own Physician Before Injury or Illness (Predesignation). You may be able to choose the doctor who will treat you for a job injury or illness. If eligible, you must tell your employer, in writing, the name and address of your personal physician or medical group before you are injured. You must obtain their agreement to treat you for your work injury. For instructions, see the written information about workers' compensation that your employer is required to give to new employees.

If You Get Hurt:

1. **Get Medical Care.** If you need emergency care, call 911 for help immediately from the hospital, ambulance, fire department or police department. If you need first aid, contact your employer.
2. **Report Your Injury.** Report the injury immediately to your supervisor or to an employer representative. Don't delay. There are time limits. If you wait too long, you may lose your right to benefits. Your employer is required to provide you with a claim form within one working day after learning about your injury. Within one working day after you file a claim form, your employer or claims administrator must authorize the provision of all treatment, up to ten thousand dollars, consistent with the applicable treatment guidelines, for your alleged injury until the claim is accepted or rejected.
3. **See Your Primary Treating Physician (PTP).** This is the doctor with overall responsibility for treating your injury or illness.
 - If you predesignated your personal physician or a medical group, you may see your personal physician or the medical group after you are injured.
 - If your employer is using a medical provider network (MPN) or a health care organization (HCO), in most cases you will be treated within the MPN or HCO unless you predesignated a personal physician or medical group. An MPN is a group of physicians and health care providers who provide treatment to workers injured on the job. You should receive information from your employer if you are covered by an HCO or a MPN. Contact your employer for more information.
 - If your employer is not using an MPN or HCO, in most cases the claims administrator can choose the doctor who first treats you when you are injured, unless you predesignated a personal physician or medical group.
4. **Medical Provider Networks.** Your employer may be using an MPN, which is a group of health care providers designated to provide treatment to workers injured on the job. If you have predesignated a personal physician or medical group prior to your work injury, then you may go there to receive treatment from your predesignated doctor. If you are treating with a non-MPN doctor for an existing injury, you may be required to change to a doctor within the MPN. For more information, see the MPN contact information below:

MPN website: WWW.TRAVELERS.COM/CAMPN

MPN Effective Date: 10-26-24 MPN Identification number 3195

If you need help locating an MPN physician, call your MPN access assistant at: (800) 287-9682

If you have questions about the MPN or want to file a complaint against the MPN, call the MPN Contact Person at (800) 287-9682

Discrimination. It is illegal for your employer to punish or fire you for having a work injury or illness, for filing a claim, or testifying in another person's workers' compensation case. If proven, you may receive lost wages, job reinstatement, increased benefits, and costs and expenses up to limits set by the state.

Questions? Learn more about workers' compensation by reading the information that your employer is required to give you at time of hire. If you have questions, see your employer or the claims administrator (who handles workers' compensation claims for your employer):

TRAVELERS PROPERTY CASUALTY COMPANY OF AMERICA

Claims Administrator **THE TRAVELERS INSURANCE COMPANIES**

Phone **(800) 238-6225**

Workers' compensation insurer _____ (Enter "self-insured" if appropriate)

You can also get free information from a State Division of Workers' Compensation Information (DWC) & Assistance Officer. The nearest Information & Assistance Officer can be found at location: _____ or by calling toll-free **(800) 736-7401**. Learn more information about workers' compensation online: www.dwc.ca.gov and access a useful booklet "Workers' Compensation in California: A Guidebook for Injured Workers."

False claims and false denials. Any person who makes or causes to be made any knowingly false or fraudulent material statement or material representation for the purpose of obtaining or denying workers' compensation benefits or payments is guilty of a felony and may be fined and imprisoned.

Your employer may not be liable for the payment of workers' compensation benefits for any injury that arises from your voluntary participation in any **off-duty, recreational, social, or athletic activity** that is not part of your work-related duties.

ESTADO DE CALIFORNIA – DEPARTAMENTO DE RELACIONES INDUSTRIALES
División de Compensación de Trabajadores



Aviso a los Empleados – Lesiones Causadas por el Trabajo

Es posible que usted tenga derecho a beneficios de compensación de trabajadores si usted se lesiona o se enferma a causa de su trabajo. La compensación de trabajadores cubre la mayoría de las lesiones y enfermedades físicas o mentales relacionadas con el trabajo. Una lesión o enfermedad puede ser causada por un evento (como por ejemplo lastimarse la espalda en una caída) o por acciones repetidas (como por ejemplo lastimarse la muñeca por hacer el mismo movimiento una y otra vez).

Beneficios. Los beneficios de compensación de trabajadores incluyen:

- **Atención Médica:** Consultas médicas, servicios de hospital, terapia física, análisis de laboratorio, radiografías, medicinas, equipo médico y costos de viajar que son razonablemente necesarias para tratar su lesión. Usted nunca deberá ver un cobro. Hay límites para visitas quiroprácticas, de terapia física y de terapia ocupacional.
- **Beneficios por Incapacidad Temporal (TD):** Pagos si usted pierde sueldo mientras se recupera. Para la mayoría de las lesiones, beneficios de TD no se pagarán por más de 104 semanas dentro de cinco años después de la fecha de la lesión.
- **Beneficios por Incapacidad Permanente (PD):** Pagos si usted no se recupera completamente y si su lesión le causa una pérdida permanente de su función física o mental que un médico puede medir.
- **Beneficio Suplementario por Desplazamiento de Trabajo:** Un vale no-transferible si su lesión surge en o después del 1/1/04, y su lesión le ocasiona una incapacidad permanente, y su empleador no le ofrece a usted un trabajo regular, modificado, o alternativo.
- **Beneficios por Muerte:** Pagados a sus dependientes si usted muere a causa de una lesión o enfermedad relacionada con el trabajo.

Designación de su Propio Médico Antes de una Lesión o Enfermedad (Designación previa). Es posible que usted pueda elegir al médico que le atenderá en una lesión o enfermedad relacionada con el trabajo. Si elegible, usted debe informarle al empleador, por escrito, el nombre y la dirección de su médico personal o grupo médico, *antes* de que usted se lesione. Usted debe de ponerse de acuerdo con su médico para que atienda la lesión causada por el trabajo. Para instrucciones, vea la información escrita sobre la compensación de trabajadores que se le exige a su empleador darle a los empleados nuevos.

Si Usted se Lastima:

1. **Obtenga Atención Médica.** Si usted necesita atención de emergencia, llame al 911 para ayuda inmediata de un hospital, una ambulancia, el departamento de bomberos o departamento de policía. Si usted necesita primeros auxilios, comuníquese con su empleador.
2. **Reporte su Lesión.** Reporte la lesión inmediatamente a su supervisor(a) o a un representante del empleador. No se demore. Hay límites de tiempo. Si usted espera demasiado, es posible que usted pierda su derecho a beneficios. Su empleador está obligado a proporcionarle un formulario de reclamo dentro de un día laboral después de saber de su lesión. Dentro de un día después de que usted presente un formulario de reclamo, el empleador o administrador de reclamos debe autorizar todo tratamiento médico, hasta diez mil dólares, de acuerdo con las pautas de tratamiento aplicables a su presunta lesión, hasta que el reclamo sea aceptado o rechazado.
3. **Consulte al Médico que le está Atendiendo (PTP).** Este es el médico con la responsabilidad total de tratar su lesión o enfermedad.
 - Si usted designó previamente a su médico personal o grupo médico, usted puede consultar a su médico personal o grupo médico después de lesionarse.
 - Si su empleador está utilizando una Red de Proveedores Médicos (MPN) o una Organización de Cuidado Médico (HCO), en la mayoría de los casos usted será tratado dentro de la MPN o la HCO a menos que usted designó previamente un médico personal o grupo médico. Una MPN es un grupo de médicos y proveedores de atención médica que proporcionan tratamiento a trabajadores lesionados en el trabajo. Usted debe recibir información de su empleador si está cubierto por una HCO o una MPN. Hable con su empleador para más información.
 - Si su empleador no está utilizando una MPN o HCO, en la mayoría de los casos el administrador de reclamos puede escoger el médico que lo atiende primero, cuando usted se lesiona, a menos que usted designó previamente a un médico personal o grupo médico.
4. **Red de Proveedores Médicos (MPN):** Es posible que su empleador use una MPN, lo cual es un grupo de proveedores de asistencia médica designados para dar tratamiento a los trabajadores lesionados en el trabajo. **Si usted ha hecho una designación previa de un médico personal antes de lesionarse en el trabajo, entonces usted puede recibir tratamiento de su médico previamente designado.** Si usted está recibiendo tratamiento de parte de un médico que no pertenece a la MPN para una lesión existente, puede querir que usted se cambie a un médico dentro de la MPN. Para más información, vea la siguiente información de contacto de la MPN:

Página web de la MPN: **WWW.TRAVELERS.COM/CAMPN**

Fecha de vigencia de la MPN: **10-26-24**

Número de identificación de la MPN: **3195**

Si usted necesita ayuda en localizar un médico de una MPN, llame a su asistente de acceso de la MPN al: **(800) 287-9682**

Si usted tiene preguntas sobre la MPN o quiere presentar una queja en contra de la MPN, llame a la Persona de Contacto de la MPN al: **(800) 287-9682**

Discriminación. Es ilegal que su empleador le castigue o despidan por sufrir una lesión o enfermedad en el trabajo, por presentar un reclamo o por testificar en el caso de compensación de trabajadores de otra persona. De ser probado, usted puede recibir pagos por pérdida de sueldos, reposición del trabajo, aumento de beneficios y gastos hasta los límites establecidos por el estado.

¿Preguntas? Aprenda más sobre la compensación de trabajadores leyendo la información que se requiere que su empleador le dé cuando es contratado. Si usted tiene preguntas, vea a su empleador o al administrador de reclamos (que se encarga de los reclamos de compensación de trabajadores de su empleador):

Administrador de Reclamos **TRAVELERS PROPERTY CASUALTY COMPANY OF AMERICA
THE TRAVELERS INSURANCE COMPANIES**

Teléfono **(800) 238-6225**

Asegurador del Seguro de Compensación de trabajador: _____ (Anoté "autoasegurado" si es apropiado)

Usted también puede obtener información gratuita de un Oficial de Información y Asistencia de la División Estatal de Compensación de Trabajadores. El Oficial de Información y Asistencia más cercano se localiza en: _____

o llamando al número gratuito **(800) 736-7401**. Usted puede obtener más información sobre la compensación del trabajador en el Internet en:

www.dwc.ca.gov y acceder a una guía útil "Compensación del Trabajador de California Una Guía para Trabajadores Lesionados."

Los reclamos falsos y rechazos falsos del reclamo. Cualquier persona que haga o que ocasione que se haga una declaración o una representación material intencionalmente falsa o fraudulenta, con el fin de obtener o negar beneficios o pagos de compensación de trabajadores, es culpable de un delito grave y puede ser multado y encarcelado.

Es posible que su empleador no sea responsable por el pago de beneficios de compensación de trabajadores para ninguna lesión que proviene su participación voluntaria en cualquier **actividad fuera del trabajo, recreativa, social, o atlética** que no sea parte de sus deberes laborales.

THIS POSTER MUST BE DISPLAYED WHERE EMPLOYEES CAN EASILY READ IT

(Poster may be printed on 8 ½" x 11" letter size paper)

**HEALTHY WORKPLACES/HEALTHY FAMILIES ACT:
CALIFORNIA PAID SICK LEAVE
(as amended effective 1/1/2024)**

Entitlement:

- An employee who, on or after July 1, 2015, works in California for 30 or more days within a year from the beginning of employment is entitled to paid sick leave.
- Paid sick leave accrues at the rate of one hour per every 30 hours worked, paid at the employee's regular wage rate. Accrual shall begin on the first day of employment or July 1, 2015, whichever is later. Accrued paid sick leave shall carry over to the following year of employment and may be capped at 80 hours or 10 days.
- An employer can also provide 5 days or 40 hours, whichever is greater, of paid sick leave "up-front" at the beginning of a 12-month period. No accrual or carry over is required.
- Other accrual plans that meet specified conditions, including PTO plans, may also satisfy the requirements.

Usage:

- An employee may use paid sick days beginning on the 90th day of employment.
- An employer shall provide paid sick days upon the oral or written request of an employee for themselves or a family member for the diagnosis, care or treatment of an existing health condition or preventive care, or specified purposes for an employee who is a victim of domestic violence, sexual assault, or stalking.
- An employer may limit the use of paid sick days to 40 hours or five days, whichever is greater, in each year of employment.

Retaliation or discrimination against an employee who requests paid sick days or uses paid sick days or both is prohibited. An employee can file a complaint with the Labor Commissioner against an employer who retaliates or discriminates against the employee.

For additional information you may contact your employer or the local office of the Labor Commissioner. Locate the office by looking at the list of offices on our website <http://www.dir.ca.gov/dlse/DistrictOffices.htm> using the [alphabetical listing of cities, locations, and communities](#). Staff is available in person and by telephone.

State of California
Department of Industrial Relations
Division of Labor Standards Enforcement

PAYDAY NOTICE

REGULAR PAYDAYS FOR EMPLOYEES OF _____
(FIRM NAME)

_____ SHALL BE AS FOLLOWS:

THIS IS IN ACCORDANCE WITH SECTIONS 204, 204A, 204B, 205, AND 205.5
OF THE CALIFORNIA LABOR CODE

BY _____

TITLE _____

DLSE 8 (REV. 06-02)

PLEASE POST

SEXUAL HARASSMENT

FACT SHEET

DFEH



Sexual harassment is a form of discrimination based on sex/gender (including pregnancy, childbirth, or related medical conditions), gender identity, gender expression, or sexual orientation. Individuals of any gender can be the target of sexual harassment. Unlawful sexual harassment does not have to be motivated by sexual desire. Sexual harassment may involve harassment of a person of the same gender as the harasser, regardless of either person's sexual orientation or gender identity.

THERE ARE TWO TYPES OF SEXUAL HARASSMENT

1. **"Quid pro quo"** (Latin for "this for that") sexual harassment is when someone conditions a job, promotion, or other work benefit on your submission to sexual advances or other conduct based on sex.
2. **"Hostile work environment"** sexual harassment occurs when unwelcome comments or conduct based on sex unreasonably interferes with your work performance or creates an intimidating, hostile, or offensive work environment. You may experience sexual harassment even if the offensive conduct was not aimed directly at you.

The harassment must be severe or pervasive to be unlawful. A single act of harassment may be sufficiently severe to be unlawful.

SEXUAL HARASSMENT INCLUDES MANY FORMS OF OFFENSIVE BEHAVIORS

BEHAVIORS THAT MAY BE SEXUAL HARASSMENT:

1. Unwanted sexual advances
2. Offering employment benefits in exchange for sexual favors
3. Leering; gestures; or displaying sexually suggestive objects, pictures, cartoons, or posters
4. Derogatory comments, epithets, slurs, or jokes
5. Graphic comments, sexually degrading words, or suggestive or obscene messages or invitations
6. Physical touching or assault, as well as impeding or blocking movements

Actual or threatened retaliation for rejecting advances or complaining about harassment is also unlawful.

Employees or job applicants who believe that they have been sexually harassed or retaliated against may file a complaint of discrimination with DFEH within three years of the last act of harassment or retaliation.

DFEH serves as a neutral fact-finder and attempts to help the parties voluntarily resolve disputes. If DFEH finds sufficient evidence to establish that discrimination occurred and settlement efforts fail, the Department may file a civil complaint in state or federal court to address the causes of the discrimination and on behalf of the complaining party. DFEH may seek court orders changing the employer's policies and practices, punitive damages, and attorney's fees and costs if it prevails in litigation. Employees can also pursue the matter through a private lawsuit in civil court after a complaint has been filed with DFEH and a Right-to-Sue Notice has been issued.

EMPLOYER RESPONSIBILITY & LIABILITY

All employers, regardless of the number of employees, are covered by the harassment provisions of California law. Employers are liable for harassment by their supervisors or agents. All harassers, including both supervisory and non-supervisory personnel, may be held personally liable for harassment or for aiding and abetting harassment. The law requires employers to take reasonable steps to prevent harassment. If an employer fails to take such steps, that employer can be held liable for the harassment. In addition, an employer may be liable for the harassment by a non-employee (for example, a client or customer) of an employee, applicant, or person providing services for the employer. An employer will only be liable for this form of harassment if it knew or should have known of the harassment, and failed to take immediate and appropriate corrective action.

Employers have an affirmative duty to take reasonable steps to prevent and promptly correct discriminatory and harassing conduct, and to create a workplace free of harassment.

A program to eliminate sexual harassment from the workplace is not only required by law, but it is the most practical way for an employer to avoid or limit liability if harassment occurs.

SEXUAL HARASSMENT

FACT SHEET



CIVIL REMEDIES

- **Damages for emotional distress from each employer or person in violation of the law**
- **Hiring or reinstatement**
- **Back pay or promotion**
- **Changes in the policies or practices of the employer**

ALL EMPLOYERS MUST TAKE THE FOLLOWING ACTIONS TO PREVENT HARASSMENT AND CORRECT IT WHEN IT OCCURS:

- 1.** Distribute copies of this brochure or an alternative writing that complies with Government Code 12950. This pamphlet may be duplicated in any quantity.
- 2.** Post a copy of the Department's employment poster entitled "California Law Prohibits Workplace Discrimination and Harassment."
- 3.** Develop a harassment, discrimination, and retaliation prevention policy in accordance with 2 CCR 11023. The policy must:
 - Be in writing.
 - List all protected groups under the FEHA.
 - Indicate that the law prohibits coworkers and third parties, as well as supervisors and managers with whom the employee comes into contact, from engaging in prohibited harassment.
 - Create a complaint process that ensures confidentiality to the extent possible; a timely response; an impartial and timely investigation by qualified personnel; documentation and tracking for reasonable progress; appropriate options for remedial actions and resolutions; and timely closures.
 - Provide a complaint mechanism that does not require an employee to complain directly to their immediate supervisor. That complaint mechanism must include, but is not limited to including: provisions for direct communication, either orally or in writing, with a designated company representative; and/or a complaint hotline; and/or access to an ombudsperson; and/or identification of DFEH and the United States Equal Employment Opportunity Commission as additional avenues for employees to lodge complaints.
 - Instruct supervisors to report any complaints of misconduct to a designated company representative, such as a human resources manager, so that the company can try to resolve the claim internally. Employers with 50 or more employees are required to

include this as a topic in mandated sexual harassment prevention training (see 2 CCR 11024).

- Indicate that when the employer receives allegations of misconduct, it will conduct a fair, timely, and thorough investigation that provides all parties appropriate due process and reaches reasonable conclusions based on the evidence collected.
- Make clear that employees shall not be retaliated against as a result of making a complaint or participating in an investigation.

4. Distribute its harassment, discrimination, and retaliation prevention policy by doing one or more of the following:

- Printing the policy and providing a copy to employees with an acknowledgement form for employees to sign and return.
- Sending the policy via email with an acknowledgment return form.
- Posting the current version of the policy on a company intranet with a tracking system to ensure all employees have read and acknowledged receipt of the policy.
- Discussing policies upon hire and/or during a new hire orientation session.
- Using any other method that ensures employees received and understand the policy.

5. If the employer's workforce at any facility or establishment contains ten percent or more of persons who speak a language other than English as their spoken language, that employer shall translate the harassment, discrimination, and retaliation policy into every language spoken by at least ten percent of the workforce.

6. In addition, employers who do business in California and employ 5 or more part-time or full-time employees must provide at least one hour of training regarding the prevention of sexual harassment, including harassment based on gender identity, gender expression, and sexual orientation, to each non-supervisory employee; and two hours of such training to each supervisory employee. Training must be provided within six months of assumption of employment. Employees must be trained during calendar year 2020, and, after January 1, 2021, training must be provided again every two years. Please see Gov. Code 12950.1 and 2 CCR 11024 for further information.

TO FILE A COMPLAINT

Department of Fair Employment and Housing

dfeh.ca.gov

Toll Free: 800.884.1684

TTY: 800.700.2320

Safety and Health Protection on the Job

State of California
Department of Industrial Relations



California law provides workplace safety and health protections for workers through regulations enforced by the Division of Occupational Safety and Health (Cal/OSHA). This poster explains some basic requirements and procedures to comply with the state's workplace safety and health standards and orders. The law requires that this poster be displayed. Failure to do so could result in a substantial penalty. Cal/OSHA standards can be found at www.dir.ca.gov/samples/search/query.htm.

WHAT AN EMPLOYER MUST DO:

All employers must provide work and workplaces that are safe and healthful. In other words, as an employer, you must follow state laws governing job safety and health. Failure to do so can result in a threat to the life or health of workers, and substantial monetary penalties.

You must display this poster in a conspicuous place where notices to employees are customarily posted so everyone on the job can be aware of basic rights and responsibilities.

You must have a written and effective Injury and Illness Prevention Program (IIPP) meeting the requirements of California Code of Regulations, title 8, section 3203 (www.dir.ca.gov/title8/3203.html) and provide access to employees and their designated representatives.

You must be aware of hazards your employees face on the job and keep records showing that each employee has been trained in the hazards unique to each job assignment.

You must correct any hazardous condition that you know may result in injury to employees. Failure to do so could result in criminal charges, monetary penalties, and even incarceration.

You must notify a local Cal/OSHA district office of any serious injury or illness, or death, occurring on the job. Be sure to do this immediately after calling for emergency help to assist the injured employee. Failure to report a serious injury or illness, or death, within 8 hours can result in a minimum civil penalty of \$5,000.

WHAT AN EMPLOYER MUST NEVER DO:

Never permit an employee to do work that violates Cal/OSHA workplace safety and health regulations.

Never permit an employee to be exposed to harmful substances without providing adequate protection.

Never allow an untrained employee to perform hazardous work.

EMPLOYEES HAVE CERTAIN WORKPLACE SAFETY & HEALTH RIGHTS:

As an employee, you (or someone acting for you) have the right to file a confidential complaint and request an inspection of your workplace if you believe conditions there are unsafe or unhealthful. This is done by contacting the local Cal/OSHA district office (see below). Your name is not revealed by Cal/OSHA, unless you request otherwise.

You also have the right to bring unsafe or unhealthful conditions to the attention of the Cal/OSHA investigator inspecting your workplace.

You and your designated representative have the right to access the employer's IIPP. Any employee has the right to refuse to perform work that would violate an occupational safety or health standard or order where such violation would create a real and apparent hazard to the employee or other employees.

You may not be fired or punished in any way for filing a complaint about unsafe or unhealthful working conditions, or for otherwise exercising your rights to a safe and healthful workplace. If you feel that you have been fired or punished for exercising your rights, you may file a complaint about this type of discrimination by contacting the nearest office of the California Department of Industrial Relations, Division of Labor Standards Enforcement (Labor Commissioner's Office) or the San Francisco office of the U.S. Department of Labor, Occupational Safety and Health Administration. (Employees of state or local government agencies may only file these complaints with the California Labor Commissioner's Office.) Consult your local telephone directory for the office nearest you.

EMPLOYEES ALSO HAVE RESPONSIBILITIES:

To keep the workplace and your coworkers safe, you should tell your employer about any hazard that could result in an injury or illness to an employee. While working, you must always obey state workplace safety and health laws.

HELP IS AVAILABLE:

To learn more about workplace safety rules, you may contact Cal/OSHA Consultation Services for free information, required forms, and publications. You can also contact a local district office of Cal/OSHA. If you prefer, you may retain a competent private consultant, or ask your workers' compensation insurance carrier for guidance in obtaining information.

Call the FREE Worker Information Helpline – (833) 579-0927

DIVISION OF OCCUPATIONAL SAFETY AND HEALTH (CAL/OSHA)

HEADQUARTERS: 1515 Clay Street, Ste. 1901, Oakland, CA 94612 – Telephone (510) 286-7000

District Offices

American Canyon	3419 Broadway St., Ste. H8, American Canyon 94503	(707) 649-3700
Bakersfield	7718 Meany Ave., Bakersfield 93308	(661) 588-6400
Foster City	1065 East Hillsdale Bl., Ste. 110, Foster City 94404	(650) 573-3812
Fremont	39141 Civic Center Dr., Ste. 310, Fremont 94538	(510) 794-2521
Fresno	2550 Mariposa St., Rm. 4000, Fresno 93721	(559) 445-5302
Long Beach	1500 Hughes Way, Suite C-201, Long Beach 90810	(424) 450-2630
Los Angeles	320 West Fourth St., Rm. 820, Los Angeles 90013	(213) 576-7451
Modesto	4206 Technology Dr., Ste. 3, Modesto 95356	(209) 545-7310
Monrovia	800 Royal Oaks Dr., Ste. 105, Monrovia 91016	(626) 239-0369
Oakland	1515 Clay St., Ste. 1303, Box 41, Oakland 94612	(510) 622-2916
Redding	381 Hemsted Dr., Redding 96002	(530) 224-4743
Sacramento	1750 Howe Ave., Ste. 430, Sacramento 95825	(916) 263-2800
San Bernardino	464 West Fourth St., Ste. 332, San Bernardino 92401	(909) 383-4321
San Diego	7575 Metropolitan Dr., Ste. 207, San Diego 92108	(619) 767-2280
San Francisco	455 Golden Gate Ave., Rm. 9516, San Francisco 94102	(415) 557-0100
Santa Ana	2 MacArthur Place, Ste. 720, Santa Ana 92707	(714) 558-4451
Van Nuys	6150 Van Nuys Blvd., Ste. 405, Van Nuys 91401	(818) 901-5403

Regional Offices

San Francisco	455 Golden Gate Ave., Rm 9516, San Francisco 94102	(415) 557-0300
Sacramento	1750 Howe Ave., Ste. 440, Sacramento 95825	(916) 263-2803
Santa Ana	2 MacArthur Place, Ste. 720, Santa Ana 92707	(714) 558-4300
Monrovia	800 Royal Oaks Dr., Ste. 105, Monrovia 91016	(626) 471-9122

Cal/OSHA Consultation Services

Field / Area Offices

•Fresno / Central Valley	2550 Mariposa Mall, Rm. 2005 Fresno 93721	(559) 445-6800
•La Palma / Los Angeles / Orange County	1 Centerpointe Dr., Ste. 150 La Palma 90623	(714) 562-5525
•Oakland/ Bay Area	1515 Clay St., Ste 1103 Oakland 94612	(510) 622-2891
•Sacramento / Northern CA	1750 Howe Ave., Ste. 490 Sacramento 95825	(916) 263-0704
•San Bernardino	464 West Fourth St., Ste. 339 San Bernardino 92401	(909) 383-4567
•San Diego / Imperial County	7575 Metropolitan Dr., Ste. 204 San Diego 92108	(619) 767-2060
•San Fernando Valley	6150 Van Nuys Blvd., Ste. 307 Van Nuys 91401	(818) 901-5754

Consultation Region Office

•Fresno	2550 Mariposa Mall, Rm. 3014 Fresno 93721	(559) 445-6800
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Enforcement of Cal/OSHA workplace safety and health standards is carried out by the Division of Occupational Safety and Health, under the California Department of Industrial Relations, which has primary responsibility for administering the Cal/OSHA program. Safety and health standards are promulgated by the Occupational Safety and Health Standards Board. Anyone desiring to register a complaint alleging inadequacy in the administration of the California Occupational Safety and Health Plan may do so by contacting the San Francisco Regional Office of the Occupational Safety and Health Administration (OSHA), U.S. Department of Labor Tel: (415) 625-2547. OSHA monitors the operation of state plans to assure that continued approval is merited.

**EMPLOYERS MUST PROVIDE THIS INFORMATION TO NEW WORKERS
WHEN HIRED AND TO OTHER WORKERS WHO ASK FOR IT**

**RIGHTS OF VICTIMS OF DOMESTIC VIOLENCE,
SEXUAL ASSAULT, STALKING, CRIMES THAT
CAUSE PHYSICAL INJURY OR MENTAL
INJURY, AND CRIMES INVOLVING A THREAT
OF PHYSICAL INJURY; AND OF PERSONS
WHOSE IMMEDIATE FAMILY MEMBER IS
DECEASED AS A DIRECT RESULT OF A CRIME**

Your Right to Take Time Off:

- You have the right to take time off from work to obtain relief from a court, including obtaining a restraining order, to protect you and your children's health, safety or welfare.
- If your company has 25 or more workers, you can take time off from work to get medical attention for injuries caused by crime or abuse, receive services from a domestic violence shelter, program, rape crisis center, or victim services organization or agency as a result of the crime or abuse, receive psychological counseling or mental health services related to an experience of crime or abuse, or participate in safety planning and take other actions to increase safety from future crime or abuse.
- You may use accrued paid sick leave or vacation, personal leave, or compensatory time off that is otherwise available for your leave unless you are covered by a union agreement that says something different. Even if you don't have paid leave, you still have the right to time off.
- In general, you don't have to give your employer proof to use leave for these reasons.
- If you can, you should tell your employer before you take time off. Even if you cannot tell your employer beforehand, your employer cannot discipline you if you give proof explaining the reason for your absence within a reasonable time. Proof can be a police report, a court order, a document from a licensed medical professional, a victim advocate, a licensed health care provider, or counselor showing that you were undergoing treatment for domestic violence related trauma, or a written statement signed by you, or an individual acting on your behalf, certifying that the absence is for an authorized purpose.

Your Right to Reasonable Accommodation:

- You have the right to ask your employer for help or changes in your workplace to make sure you are safe at work. Your employer must work with you to see what changes can be made. Changes in the workplace may include putting in locks, changing your shift or phone number, transferring or reassigning you, or help with keeping a record of what happened to you. Your employer can ask you for a signed statement certifying that your request is for a proper purpose, and may also request proof showing your need for an accommodation. Your employer cannot tell your coworkers or anyone else about your request.

Your Right to Be Free from Retaliation and Discrimination:

Your employer cannot treat you differently or fire you because:

- You are a victim of domestic violence, sexual assault, stalking, a crime that caused physical injury or mental injury, or a crime involving threat of physical injury; or are someone whose immediate family member is deceased as a direct result of a crime.
- You asked for leave time to get help.
- You asked your employer for help or changes in the workplace to make sure you are safe at work.

You can file a complaint with the Labor Commissioner's Office against your employer if he/she retaliates or discriminates against you.

For more information, contact the California Labor Commissioner's Office. We can help you by phone at 213-897-6595, or you can find a local office on our website: www.dir.ca.gov/dlse/DistrictOffices.htm. If you do not speak English, we will provide an interpreter in your language at no cost to you. This Notice explains rights contained in California Labor Code sections 230 and 230.1. Employers may use this Notice or one substantially similar in content and clarity.

Labor Commissioner's Office Victims of Domestic Violence, Sexual Assault and Stalking Notice

3/2021

The Division of Labor Standards Enforcement believes that the sample posting below meets the requirements of Labor Code Section 1102.8(a). This document must be printed to 8.5 x 14 inch paper with margins no larger than one-half inch in order to conform to the statutory requirement that the lettering be larger than size 14 point type.

WHISTLEBLOWERS ARE PROTECTED

It is the public policy of the State of California to encourage employees to notify an appropriate government or law enforcement agency, person with authority over the employee, or another employee with authority to investigate, discover, or correct the violation or noncompliance, and to provide information to and testify before a public body conducting an investigation, hearing or inquiry, when they have reason to believe their employer is violating a state or federal statute, or violating or not complying with a local, state or federal rule or regulation.

Who is protected?

Pursuant to [California Labor Code Section 1102.5](#), employees are the protected class of individuals. "Employee" means any person employed by an employer, private or public, including, but not limited to, individuals employed by the state or any subdivision thereof, any county, city, city and county, including any charter city or county, and any school district, community college district, municipal or public corporation, political subdivision, or the University of California. [[California Labor Code Section 1106](#)]

What is a whistleblower?

A "whistleblower" is an employee who discloses information to a government or law enforcement agency, person with authority over the employee, or to another employee with authority to investigate, discover, or correct the violation or noncompliance, or who provides information to or testifies before a public body conducting an investigation, hearing or inquiry, where the employee has reasonable cause to believe that the information discloses:

1. A violation of a state or federal statute,
2. A violation or noncompliance with a local, state or federal rule or regulation, or
3. With reference to employee safety or health, unsafe working conditions or work practices in the employee's employment or place of employment.

A whistleblower can also be an employee who refuses to participate in an activity that would result in a violation of a state or federal statute, or a violation of or noncompliance with a local, state or federal rule or regulation.

What protections are afforded to whistleblowers?

1. An employer may not make, adopt, or enforce any rule, regulation, or policy preventing an employee from being a whistleblower.
2. An employer may not retaliate against an employee who is a whistleblower.
3. An employer may not retaliate against an employee for refusing to participate in an activity that would result in a violation of a state or federal statute, or a violation or noncompliance with a state or federal rule or regulation.
4. An employer may not retaliate against an employee for having exercised his or her rights as a whistleblower in any former employment.

Under [California Labor Code Section 1102.5](#), if an employer retaliates against a whistleblower, the employer may be required to reinstate the employee's employment and work benefits, pay lost wages, and take other steps necessary to comply with the law.

How to report improper acts

If you have information regarding possible violations of state or federal statutes, rules, or regulations, or violations of fiduciary responsibility by a corporation or limited liability company to its shareholders, investors, or employees, **call the California State Attorney General's Whistleblower Hotline at 1-800-952-5225**. The Attorney General will refer your call to the appropriate government authority for review and possible investigation.

EMERGENCY

AMBULANCE: _____

FIRE — RESCUE: _____

HOSPITAL: _____

PHYSICIAN: _____

ALTERNATE: _____

POLICE: _____

CAL/OSHA: _____

Posting is required by Title 8 Section 1512 (e), California Code of Regulations



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