

COVID-19 SICK LEAVE CREDIT WORKSHEET FOR SELF-EMPLOYED INDIVIDUALS

NAME: _____

If a day meets the requirements for both the Credit for Sick Leave for Certain Self-Employed Individuals in questions 1 or 2 and the Credit for Family Leave for Certain Self-Employed Individuals question 3, the day can only be counted once. Don't include the same day on multiple lines.

1. Number of days in 2021 that you were unable to perform services as a self-employed individual due to certain COVID-related care of self _____

- *You were subject to a federal, state, or local quarantine or isolation order related to COVID-19.*
- *You were advised by a health care provider to self-quarantine due to concerns related to COVID-19.*
- *You were experiencing symptoms of COVID-19 and seeking a medical diagnosis.*

2. Number of days in 2021 that you were unable to perform services as a self-employed individual due to certain COVID-related care provided to another (Do not include days included in line 1) _____

- *You were caring for an individual who was subject to a federal, state, or local quarantine or isolation order related to COVID-19.*
- *You were caring for an individual who was advised by a health care provider to self-quarantine due to concerns related to COVID-19.*

3. Number of days in 2021 that you were unable to perform services as a self-employed individual due to certain COVID-related care provided to a son or daughter. _____

- *You were caring for a son or daughter because the school or place of care for that child was closed or the childcare provider for that child was unavailable due to COVID-19 precautions.*