Certification for Serious Injury or Illness of a Current Servicemember - -for Military Family Leave (Family and Medical Leave Act)

U.S. Department of Labor

Wage and Hour Division

SECTION II: For Completion by a United States Department of Defense ("DOD") Health Care Provider or a Health Care Provider who is either: (1) a United States Department of Veterans Affairs ("VA") health care provider; (2) a DOD TRICARE network authorized private health care provider; (3) a DOD non-network TRICARE authorized private health care provider; or (4) a health care provider as defined in 29 CFR 825.125. If yo.5(8R)6.6n Tc r.9(w)6.6.9(a)-5(DO)-(8Rmn) hea(d)-81.0402 Tw 11.04 e9AFR

(5)	Is the servicemember undergoing medical treatment, recuperation, or therapy for this condition? Yes \square	√o□
	If yes, please describe medical treatment, recuperation or therapy:	