

# **Employee Handbook - May 2019**

**Citadel Servicing Corporation**

***City of San Francisco Addendum***





## San Francisco Paid Parental Leave

Employees who receive California Paid Family Leave (PFL) payments from the California Employment Development Department (EDD) for purposes of new child bonding during the first year after the child's birth or placement with the employee through foster care or adoption may be eligible to receive Supplemental Compensation from Citadel Servicing Corporation as required by San Francisco's Paid Parental Leave Ordinance (PPLO). The PPLO program does not provide employees with a right to a leave of absence; it is limited to a city-mandated wage replacement benefit for employees receiving PFL benefits from the state for new child bonding purposes.

Citadel Servicing Corporation will provide Supplemental Compensation in an amount equal to 100 percent of your gross weekly wages, less the amount of PFL benefits, up to a cap if you are receiving the Maximum Weekly Benefit Amount under the PFL law. The total amount of Supplemental Compensation you receive from all employers, combined with PFL benefits, may not exceed 100 percent of your current normal gross weekly wages.

For more information about Supplemental Compensation, please contact the Human Resources Department.

To be eligible to receive Supplemental Compensation, you must:

- Have been employed with Citadel Servicing Corporation at least 180 days prior to the start of the leave period;
- Perform at least eight hours of work per week for Citadel Servicing Corporation in San Francisco;
- Perform at least 40 percent of your total work hours for Citadel Servicing Corporation in San Francisco;
- Apply for and receive paid family leave compensation from the state of California under the California PFL law for the purpose of bonding with a new child; and
- Agree to allow Citadel Servicing Corporation to apply up to two weeks of accrued unused vacation leave to help Citadel Servicing Corporation meet its obligation to provide Supplemental Compensation.

Before you can receive Supplemental Compensation, you must complete and submit a Paid Parental Leave Form (PPL Form) to the Human Resources Department. On the PPL Form, you must:

- Indicate how you will provide Citadel Servicing Corporation with notice of the EDD PFL benefit amount you will receive from EDD (see below);
- Agree to reimburse Citadel Servicing Corporation the full amount of Supplemental Compensation you received if you voluntarily separate from employment within 90 days of the end of the leave period and Citadel Servicing Corporation requests reimbursement in writing; and



- Report wages from other employer(s), if any, and submit a copy of the completed PPL Form to each employer.

You can notify Citadel Servicing Corporation of the amount of PFL you are receiving by selecting one or both of the following options:

- Providing Citadel Servicing Corporation with a copy of the Notice of Computation as soon as you receive it from the EDD, notifying Citadel Servicing Corporation when you receive your first PFL payment from the EDD and providing Citadel Servicing Corporation with the Notice of Payment you receive from the EDD; and/or
- Providing the EDD with written authorization to disclose the weekly PFL benefit amount to Citadel Servicing Corporation upon request, and then notify Citadel Servicing Corporation on the PPL Form that you have granted such permission to EDD.

If you plan to receive PFL benefits intermittently, you must notify Citadel Servicing Corporation of the schedule of intermittent leave you provided to the EDD.

## Sick Leave - San Francisco

As of February 7, 2007, San Francisco law provides for mandatory paid sick leave under the City's Paid Sick Leave Ordinance (the "PSLO"). As of July 1, 2015, California law provides for mandatory paid sick leave under the Healthy Workplaces, Healthy Families Act (the "State Law"). This policy is intended to comply with the requirements of the PSLO and the State Law by providing a single paid sick leave benefit ("San Francisco Sick Leave," or "SFSL"). Employees eligible for SFSL are not eligible for sick leave under any other Company policy.

If you have any questions about SFSL, please contact the HR Department.

### Eligible Employees

All employees, including part-time and temporary employees, who work at least 56 hours per year in the City and County of San Francisco for Citadel Servicing Corporation will be entitled to SFSL. **However, new employees are not eligible to use SFSL until their 90th day of employment.**

### Amount of San Francisco Sick Leave

Eligible employees accrue SFSL at the rate of one hour of SFSL for every 30 hours worked, beginning on their first day of employment with the Company. SFSL accrues in hour-unit increments.



The Company does not pay employees for unused SFSL. Employees who are rehired within one year of separation from employment may be eligible for reinstatement of previously accrued and unused SFSL.

### **Cap on Accrual**

Employees may accrue a maximum of 72 hours of SFSL. After an employee has reached this maximum amount, no additional SFSL will accrue until some or all of the employee's SFSL is used. Accrued, unused SFSL carries over from year to year, subject to the maximum accrual.

### **Qualifying Reasons for San Francisco Sick Leave**

San Francisco Sick Leave can be used for the following reasons:

- For medical care, treatment, diagnosis, or preventive care, or for any other medical reason related to an employee's own illness, injury, or medical condition.
- To aid or care for a covered family member, as defined below, who is receiving medical care, treatment, diagnosis, or preventive care, or for any other medical reason related to a covered family member's illness, injury, or medical condition.
- For certain, specified purposes when an employee is a victim of domestic violence, sexual assault, or stalking.
- For purposes related to donating the employee's bone marrow or an organ of the employee to another person, or to care for or assist a covered family member for purposes related to that person's donating bone marrow or an organ to another person.

For purposes of SFSL, a covered family member includes:

- A child, defined as a biological, foster, or adopted child; a stepchild; or a legal ward, regardless of the age or dependency status of the child. "Child" also includes a child of a domestic partner or a child to whom you act as a parent, even if he or she is not your legal child.
- A parent, defined as a biological, foster, or adoptive parent; a stepparent; or a legal guardian. "Parent" also includes a person who is a biological, foster, or adoptive parent, a stepparent, or a legal guardian of your spouse or registered domestic partner; or a person who acted as your parent when you were a minor, even if he or she is not your legal parent.
- A sibling, including biological, adoptive, foster and step-relationships.
- A grandparent, including biological, adoptive, foster and step-relationships.
- A grandchild, including biological, adoptive, foster and step-relationships.
- A spouse.
- A registered domestic partner.
- A designated person you name in advance on a form provided for this purpose, if you do not have a spouse or registered domestic partner.



## **Use of San Francisco Sick Leave**

San Francisco Sick Leave is intended to be used only when actually required for the reasons described above and is not to be used for other "personal" absences. Employees are not required, as a condition of using SFSL, to search for or find a replacement worker to cover the hours during which the employee is using SFSL. Employees cannot be discriminated against or retaliated against for requesting or using accrued SFSL.

If the need for paid sick leave is foreseeable, employees shall provide reasonable advance oral or written notification to the manager or HR Department. If the need for paid sick leave is not foreseeable, employees shall provide notice of the need for the leave to their manager or HR Department as soon as practicable.

An employee's use of SFSL may run concurrently with other leaves under local, state, or federal law.

## **Incremental Use**

San Francisco Sick Leave can be used in a minimum increment of two hours.

## **San Francisco Sick Leave and Workers' Compensation Benefits**

San Francisco Sick Leave is a benefit that also covers absences for work-related illness or injury. Employees who have a work-related illness or injury are covered by workers' compensation insurance. However, workers' compensation benefits usually do not cover absences for medical treatment. When you report a work-related illness or injury, you will be sent for medical treatment if treatment is necessary. You will be paid your regular wages for the time you spend seeking initial medical treatment.

Any further medical treatment will be under the direction of the health care provider. Any absences from work for follow-up treatment, physical therapy or other prescribed appointments will not be paid as time worked. If you have accrued and unused SFSL, you may use SFSL to receive pay for these absences.

If you do not have accrued SFSL, you may choose to substitute vacation/paid time off for further absences from work related to your illness or injury.



### **ACKNOWLEDGMENT OF RECEIPT**

I have received a copy of the City of San Francisco Addendum to the Employee Handbook ("San Francisco Addendum") and understand that it contains important information about Citadel Servicing Corporation's ("Company") personnel policies and about my privileges and obligations as an employee in the city of San Francisco. I acknowledge that I am expected to read, understand, and adhere to Company policies and to familiarize myself with the material in the Employee Handbook and the San Francisco Addendum, and that the Company may change, rescind, delete, or add to any policies, benefits, and practices described in the Handbook and the San Francisco Addendum from time to time, at its sole and absolute discretion, with or without prior notice. The Company will advise employees of material changes within a reasonable time.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

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Print Name