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**City of Baltimore
Cancer Screening Program**

Certification Form

- City of Baltimore permanent full-time and permanent part-time employees will be granted the use of permission time up to four (4) hours per calendar year for cancer screening.
- Such leave **will not** be charged to any accrues leave unless the screening exceeds the four hour maximum permission time.
- To ensure appropriate coverage at the worksite, prior approval from the employee’s supervisor for the 4-hour leave is required.
- The employee must submit the completed form to his/her supervisor for the 4-hour screening benefit to be applied. The supervisor must send this form to the Agency’s human resource/personnel office for filing.
- Early detection through regular screening is the best form of prevention for all cancers. Employees are encouraged to undergo cancer screening. Take care of your health – get screened!

Physician/Medical Facility

This form is to be completed by the physician or health care professional/medical facility conducting the cancer screening.

_____ has undergone a cancer screening at our facility.

Employee/Patient Name

The cancer screening was administered on: _____

Date

Physician/Health Care Professional:

Printed Name

Signature

Physician/Health Care Facility Address: _____

Tel: (____) _____

Please place Physician/Health Care Facility
verification/validation stamp
here →