

[illegible]



How to request FMLA leave?

Generally, if you request FMLA leave, you must:

- Follow your employer's usual policies for requesting leave.
- Give notice at least 30 days before your need for FMLA leave, or
- Give advance notice if not possible. Give notice as soon as possible.

You do not have to have a medical diagnosis! But provide enough information to your employer so they can determine whether the leave qualifies for FMLA protection. You **must also inform your**

DEPARTMENT OF LABOR

WAGE AND HOUR DIVISION

UNITED STATES DEPARTMENT OF LABOR



WHT420

REV. 04/2023

YOUR RIGHTS UNDER USERRA

THE UNIFORMED SERVICES EMPLOYMENT AND REENTRY RIGHTS ACT

USERRA protects the rights of individuals who voluntarily or involuntarily leave employment positions to undertake military service or certain types of service in the National Disaster System Service. USERRA also prohibits employers from discriminating against and past present members of the uniformed services, and applicants to the uniformed services.

REEMPLOYMENT RIGHTS

If you have the right to be reemployed in your civilian job you have the job that you perform service in the uniformed service, and

- you ensure that your employee receives advance written or verbal notice of the service;
- you have five years of less cumulative service in the uniformed services while with that particular employer;
- you return to work or apply for reemployment in a timely manner after conclusion of service; and
- you have not been separated from service with a disqualifying discharge or under other non-honorable conditions.

If you are eligible to be reemployed, you must be interested to do the same job and benefits you would have attained if you had been absent due to military service, or, in certain cases, a comparable job.

RIGHT TO BE FREE FROM DISCRIMINATION AND RETALIATION

If you:

- are a part or prospective member of the uniformed service;
- are obligated to serve in the uniformed service;
- have applied for membership in the uniformed service; or
- are a member of the uniformed service,

then an employer may not deny you:

HEALTH INSURANCE PROTECTION

If you are a member of the uniformed services, you have the right to be restored to your existing employer-based health plan coverage for you and your dependents for up to 18 months while in the military.

- Even if you don't elect to continue coverage during your military service, you have the right to be reinstated in your employer's health plan when you are reemployed, generally during any waiting period or exclusion (i.e., pre-existing condition exclusion) except for care: Veterans' illnesses or injuries.

EMPLOYMENT BENEFITS

- The U.S. Department of Labor, Contracted Employees and Training Service (YETS) is authorized to investigate and resolve employee complaints of USERRA violations.
- For assistance in filing a complaint, or for any other information on USERRA, contact YETS at [1-866-434-3246](tel:1-866-434-3246) or visit its website at www.dhs.gov/yets.
- For more information on USERRA, an interactive online USERRA Advisor can be viewed at <http://webdhs.gov/yets/faq/contracted-employees-services>.
- If you file a complaint with YETS, and YETS determines that you may be required that your service be referred to the Department of Justice or Office of the Special Counsel, as appropriate, for representation.
- You may also bring your USERRA complaint and bring a civil action against an employer for violations of USERRA.

The rights listed here may vary depending on the circumstances. The text of this

SAFETY LEAVE EMPLOYEE NOTICE

Employees are permitted to use earned sick and safe leave in increments in certain amounts established by their employer. Employees are required to give notice of the need to use earned sick and safe leave when it is foreseeable. An employer may deny leave in certain circumstances.

Reporting

Employees are required to provide employees with a written statement the employee's available earned sick and safe leave.

Prohibitions

An employer is prohibited under the law from taking adverse action against an employee who exercises a right under the Maryland Healthy Workplaces Law and an employer is prohibited from making a complaint, bringing an action, or testifying in an action in bad faith.

How to File a Complaint or Obtain Additional Information

If you feel your rights have been violated under this law you would need additional information, you may contact:

COMMISSIONER OF LABOR AND INDUSTRY
10946 GOLDS WEST DRIVE, SUITE 160 - HARTFORD, MD 21031
SLSACTION@MDHARTFORD.GOV

WORKERS' COMPENSATION

LA COMPENSACIÓN DEL TRABAJADOR

in
en

Maryland

Job Related Accidental Personal Injury or Occupational Disease?

If you are disabled and unable to work for more than three (3) days, your employer's workers' compensation insurance company may pay your medical bills and other expenses and replace two-thirds (2/3) of your salary (limited to the maximum set by law).

¿Accidentes por lesión/daño corporal relacionados con el Empleo o Enfermedad Profesional?

Si usted se encuentra incapacitado o inhabilitado para trabajar por más de tres días, el seguro de trabajadores que tienen las compañías pudiera cubrir las facturas médicas y otros gastos relacionados. También le compensarán 2/3 de sus ingresos (Hasta un monto máximo estipulado por la ley).

If you are injured on the job:

1. Notify your employer or supervisor at once. You cannot receive full benefits unless your employer knows you are injured.
2. Tell the doctor who treats you that you were hurt on the job.
3. Complete an Employee's Claim Form C-1 (available by phone or on the Commission's website) and send it to us as soon as possible.

Si usted sufre una lesión en el trabajo, debe:

1. Informarle a su empleador o supervisor de inmediato. No podría recibir todos sus beneficios a menos que su empleador fuere notificado que sufrió una lesión.
2. Informarle al médico quien le administre tratamiento que usted se lesionó en su trabajo.

Note: Withholding information or giving false information about any work-related activity or return to work could prevent you from receiving benefits and may subject you to fines, imprisonment or both.

3. llenar el formulario Employee's Claim Form C-1 (disponible consultando la página del Internet para el Workers' Compensation o solicitando uno por teléfono). Diligenciarlo para que las oficinas del Workers' Compensation lo reciban lo antes posible.

Aviso: El suministrar información falsa u ocultar información sobre cualquier actividad relacionada con su trabajo o relacionada con su regreso al trabajo, pudiera acarrear los beneficios que recibiera o pudiera acarrearle multas, encarcelamiento o ambas.

Employer/Empleador _____

Business Address/Dirección _____

City/State/Zip _____

Ciudad/Estado/Código Postal _____

Federal Employer ID (FEIN) _____

Identificación Federal Del Empleador _____

Telephone Number/Número Telefónico _____

Insurance Company Name _____

La Compañía de Seguro _____

Insurance Company Telephone _____

Telefónico de la Compañía de Seguro _____

MD WCC Form C-24 05/2017

Maryland Workers' Compensation Commission
10 East Baltimore Street, Baltimore, Maryland 21202-1641
(410) 864-5100 / Outside Baltimore (800) 492-0479

Webpage - <http://www.wcc.state.md.us> / TTY Users - 711 in Maryland or (800) 735-2258

This notice must be printed on 8.5" X 14" gold or yellow paper, display complete employer information and be posted in a conspicuous location at each work site or location in accordance with COMAR 14.09.01.02 and 14.09.01.10.

MD

Department of Labor
TO BE POSTED
HEALTH INSURANCE COVERAGE

You and other members of your family may be eligible under Maryland law to continue to be covered by your former employer's health insurance policy if:

- You quit your job or you were terminated from your employment for a reason other than for cause; and
- You are covered by your employer under a group hospital medical policy or a health maintenance organization (HMO) for at least three (3) months prior to being separated from your employment; and
- You do not have other similar insurance.

If you wish to continue your health insurance, you MUST give your employer written notice no later than forty-five (45) days after your last day of work.

IMPORTANT:
 You will be responsible for paying the entire cost of the health insurance policy.
 For further information about the program, you should contact your employer, or if necessary, telephone the Insurance Administration in Baltimore at (410) 460-2244 or 1-800-492-0116 (Ext. 2244).

STATE OF MARYLAND
MARYLAND DEPARTMENT OF LABOR

THIS NOTICE APPLIES TO STATE LAW.
YOU MAY HAVE BROADER BENEFITS UNDER FEDERAL LAW.
TO BE POSTED

PUB-001 616

Department of Labor, Licensing and Regulation

Safety and health protection on the job

MARYLAND OCCUPATIONAL SAFETY and HEALTH ACT
PRIVATE SECTOR

The Maryland Occupational Safety and Health Act of 1973 provides job safety and health protection for workers through the promotion of safe and lawful working conditions throughout the State. Requirements of the Act include the following:

Employers:

Each employer shall furnish to each of his or her employees employment and a place of employment free from recognized hazards that are causing or are likely to cause death or serious harm to employees; and shall comply with occupational safety and health standards issued under the Act.

MD

Department of Labor, Division of Labor and Industry

Notice to Tipped Employees

Under Maryland law, a tipped employee is an employee who customarily and regularly receives more than \$30 each month in tips as a gratuity.

Maryland law prohibits an employer from requiring a tipped employee to reimburse an employer or pay an employer for the amount of a customer's charge for food or beverage if the customer leaves the employee's place of business without paying for the charge. In addition, unless otherwise provided by law, an employer is prohibited from making a deduction to an employee's wages to cover the cost of a customer's charge for food or beverage if the customer leaves the employee's place of business without paying the charge for food or beverage.

If you think your wages have been required to make an improper payment or that there has been an improper deduction from your wages related to a customer's charges if the customer leaves the place of business without paying

the charge, you may contact the Commissioner of Labor and Industry at:

Dorcasen or LaDon

Division of Labor and Industry

Employment Standards Section

1904a Geauga West Drive, Suite 160

New York, NY 10011

Tel: (212) 405-2337

Fax: (212) 405-3383

E-mail: disorders@doel.ny.gov

www.dol.ny.gov

PURSUANT TO §§ 3-713 (C) OF THE LABOR AND EMPLOYMENT ACT OF THE MARYLAND ANNOTATED CODE, EMPLOYERS ARE REQUESTED TO CONSPICUOUSLY POST THIS NOTICE IN A PLACE WHERE ALL TIPPED EMPLOYEES IS EMPLOYED.

REV. 02/2022

MD

Commission on Civil Rights

Employment Discrimination is Unlawful

How Does The Law Protect Me?

State Government Article, §20-802 of the Annotated Code of Maryland provides every Marylander equal protection in employment regardless of:

- Race
- Physical or Mental Disability
- Sex
- Color
- Ethnicity
- Marital Status
- Religion or National Origin
- Sexual Orientation
- Age
- Genetic Information

What Am I Protected From?

You are protected from unlawful discrimination from the following employment-related practices:

- Employers cannot discriminate in recruiting, interviewing, hiring, upgrading/promoting, setting work conditions, and discharging an employee.
- Labor organizations cannot deny membership to qualified persons or discriminate in apprenticeship programs.
- Employment agencies cannot discriminate by race, religion, age, sex, sexual orientation, or ethnicity.
- Employers, or clerical information that unlawfully limits employment.
- Newspapers and other media cannot publish job advertisements that discriminate.

Mail: (410) 637-8600 / Toll Free: 1-800-637-4247 / TTY: (410) 333-1727 / Fax: 1-800-333-1841

Employees:

each employee who complies with an occupational safety and health standards and orders issued under the Act that apply to his or her own actions and conduct on the job.

The Commissioner of Labor and Industry has the primary responsibility for administering the Act and issuing occupational safety and health standards. MOSH Safety and Health Inspectors conduct jobsite inspections to ensure compliance with the Act.

Inspection:

The Act requires that a representative authorized by the employees be given an opportunity to accompany the MOSH Inspector for the purpose of aiding the inspection.

Where there is no authorized employee representative, the MOSH Inspector shall consult with a reasonable number of employees concerning safety and health conditions in the workplace.

Complaint:

Employees or their representatives have the right to file a complaint with the Commissioner requesting an inspection if they believe unsafe or unhealthful conditions exist in their workplace. The Commissioner will withhold names of employees complaining on request.

The Act provides that employees may not be discharged or discriminated against in any way for filing safety and health complaints or otherwise exercising their rights under the Act.

An employee who believes he or she has been discriminated against may file a complaint with the Commissioner and/or the Federal Occupational Safety and Health Administration Regional Office within 30 days of the alleged discrimination.

Citation:

If upon an inspection the Commissioner believes an employer has violated the Act, a citation alleging such violations shall be issued to the employer. Each citation shall specify a time period within which the alleged violation must be corrected.

The MOSH citation must be prominently displayed at or near the place of alleged violation for three days, or until it is corrected, whichever is later, to warn employees of dangers that may exist there.

Proposed Penalty:

The Act provides for mandatory civil penalties against employers. Civil penalties up to the maximum penalty each day may be assessed for failure to correct violations within the proposed time period. Also, any employer who willfully or repeatedly violates the Act may be assessed civil penalties of up to 10 times the maximum penalty amount for each such violation.

In compliance with Labor and Employment Article, §§-810, Ch. 104, Acts of 2024:

- Beginning with inspections that take place on or after July 15, 2025, the maximum penalty is:
 - \$16,550 for each violation;
 - \$16,550 for each day an identified violation is not corrected within the period allowed for correction; and
 - \$161,323 for each willful or repeated violation.
- The new minimum civil penalty for a willful violation is \$16,550 for each violation.
- The Commissioner of Labor will annually increase the maximum and minimum willful civil penalties by the calendar year percentage increase in the Consumer Price Index for All Urban Consumers (CPI-U) or a successor index, effective by July 15th of each year. The Commissioner of Labor will maintain the current penalty percentages on the MOSH website: <https://www.labor.maryland.gov/labor/mosh/moshguidance.shtml>

In addition to mandatory civil penalties, the Act also provides for imposition of criminal penalties. Any willful violation of the Act resulting in

mccr.org | www.mccr Maryland

MD

Commission on Civil Rights
Pregnant & Working

Know Your Rights!

If you are pregnant, you have a legal right to a reasonable accommodation if your pregnancy causes or contributes to a disability and the accommodation does not impose an undue hardship on your employer. State Government Article, §20-609(b)

What Does That Mean?

If you have a disability that is contributed to or caused by pregnancy, you may request a reasonable accommodation at work. Your employer must explore "all possible means of providing the reasonable accommodation." State Government Article, §20-609(b) The law lists an assortment of options for both you and your employer to consider in order to comply with a request for reasonable accommodation. These include, but are not limited to:

- Changing job duties
- Transfers to less strenuous or less hazardous positions
- Changing work hours
- Reducing
- Providing mechanical
- or electrical aids
- Providing leave

Every situation is different. You must explore every available option with your employer to decide what accommodation best suits your needs.

Do I Need a Doctor's Note?

It depends on what your employer requires. The law allows an employer, at his or her discretion, to require certification from your health care provider regarding the medical availability of a reasonable accommodation, but only to the same extent certification is required for any temporary disability. State Government Article, §20-609(b)

- If required, the certification must include:
• Date a reasonable accommodation is medically advisable.

- Probable duration of the accommodation should be provided.
- Explanation as to the medical availability of the reasonable accommodation.

Can I Still Get In Trouble?

Retaliation is prohibited under State Government Article, §20-609(b) when exercising your rights. If an employee seeks to exercise her right to request a reasonable accommodation for a temporary disability due to pregnancy, an employer may:

- Interfere with;
- Deny the ability to exercise the right.
- Retaliate.
- Deny the exercise; or
- Any form of retaliation is grounds for file a Complaint of Discrimination with the Maryland Commission on Civil Rights (MCCR).

What If I Am Victim of Discrimination?

If you believe your rights under the law have been violated, you must file a complaint with MCCR within 300 days of the alleged act of discrimination. A trained Civil Rights Officer will work with you to discuss what happened and determine if there is reason to believe a discriminatory violation may have occurred. You can reach MCCR by phone, email, fax, letter, or walk-in. **All procedures by MCCR are confidential unless you file a certified for public hearing or trial.**

State of Maryland
Commission on Civil Rights
c/o Sean P. Sawyer, State 900
Baltimore, MD 21202-1631

Main: (410) 767-8600 / Toll Free: 1 (800) 637-6241
Toll: (410) 333-1757 / Fax: (410) 333-1847

mccr@md.gov | www.mccr.maryland.gov

Voluntary
Action:

While providing penalties for violation, the Act also encourages efforts by labor and management to reduce injuries and illnesses arising out of employment. The Commissioner of Labor and Industry encourages employers and employees to reduce workplace hazards voluntarily and to develop and improve safety and health programs in all workplaces and industries.

Such cooperative action would initially focus on the identification and elimination of hazards that could cause death, injury, or illness to employees and supervisors. There are many public and private organizations that can provide information and assistance in this effort, if requested.

ADDITIONAL INFORMATION AND COPIES OF THE ACT, SPECIFIC MARYLAND OCCUPATIONAL SAFETY AND HEALTH STANDARDS, AND OTHER APPLICABLE REGULATIONS MAY BE OBTAINED FROM

MOSH TRAINING AND EDUCATION

10946 GOLDEN WEST DRIVE, SUITE 160

HUNT VALLEY, MARYLAND 20131

PHONE: 410-527-2091

Complaints about State Program administration may be made to Regional Administrator, Occupational Safety and Health Administration, 1835 Market Street, Mailstop OSHA-RO/19, Philadelphia, PA 19103

TWO ways to verify poster compliance!

QR CODE

Scan with phone camera:

OR

Go to: JJKeller.com/LLVerify

To update your labor law posters contact

J. J. Keller & Associates, Inc.
JJKeller.com/lablaw
800-327-6868

J. J. Keller
& Associates, Inc.
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