

You must include documentation of your family relationship to the person needing care. This documentation could be one of the following. Please indicate which documentation you are submitting by checking a box below:

- Birth certificates showing family relationships
- Court documents
- Other documentation proving relationship
- PFL Certification of Family Relationship form (PFL-FR) (You may use this form if you do not have access to any other documents proving a family relationship.)

You must also include the PFL Medical Certification Form for Family Leave Events (PFL-FMC) with your application for benefits. This form must be completed by a health care provider.

A. INFORMATION ABOUT THE CLAIMANT				
Last four of your SSN or ITIN		Last Name		
B. INFORMATION ABOUT THE FAMILY MEMBER FOR WHOM THE CLAIMANT IS PROVIDING CARE				
Last Name		First Name		Middle Name
Date of Birth ____/____/____		Gender (Male / Female / Prefer to Self-Describe)		
Mailing Address Street		City	State	Zipcode
This person's relationship to you (enter relationship code): _____ Refer to page 2 of this form for the relationship code _____				
C. INFORMATION ABOUT THE CLAIMANT'S FAMILY LEAVE EVENT				
Describe the nature of the care or companionship you will provide to your family member.				

<input type="checkbox"/> I certify that the information I have provided on this application is true and complete.				
Signature: _____			Date: _____	

RELATIONSHIP CODES

Child

- A-1: biological child
- A-2: adopted child
- A-3: foster child
- A-4: stepchild
- A-5: child of your domestic partner
- A-6: child to whom you stand in loco parentis
- A-7: legal ward

Parent

- B-1: biological parent
- B-2: adopted parent
- B-3: foster parent
- B-4: stepparent
- B-5: parent of your spouse
- B-6: current legal guardian
- B-7: person who stood in loco parentis to you as a child

Grandparent

Biological parent of your:

- Ca-1: biological parent
- Ca-2: adopted parent
- Ca-3: foster parent
- Ca-4: stepparent

Adopted parent of your:

- Cb-1: biological parent
- Cb-2: adopted parent
- Cb-3: foster parent
- Cb-4: stepparent

Grandparent (continued)

Foster parent of your:

- Cc-1: biological parent
- Cc-2: adopted parent
- Cc-3: foster parent
- Cc-4: stepparent

Stepparent of your:

- Cd-1: biological parent
- Cd-2: adopted parent
- Cd-3: foster parent
- Cd-4: stepparent

Spouse

- D-1: by marriage
- D-2: by domestic partnership

Sibling

- E-1: biological sibling
- E-2: adopted sibling
- E-3: foster sibling
- E-4: step sibling
- E-5: half sibling
- E-6: spouse of your sibling (sibling-in-law)
- E-7: sibling of your spouse (sibling-in-law)
- E-8: spouse of your spouse's sibling (sibling-in-law)