

KNOX COUNTY SCHOOLS
EMPLOYEE MEDICAL HISTORY

Name _____ SS# _____

School _____ Position _____

HISTORY (To be completed by employee prior to examination)

Have you ever filed a workers' compensation claim or received disability for workers' compensation?

Yes No If yes, explain _____

I certify that the answers and information provided by me are true, correct, and complete to the best of my knowledge. I further understand any false or misleading information or omission of fact given on this form may result in discharge.

Employee Signature _____ Date _____

RECORD OF EXAMINATION (To be completed by physician)

1) Is this individual currently able to perform the specific job described in the attached job description with/without an accommodation?

Yes No Examination remarks:

2) Is this individual currently able to perform this job without posing a "direct threat", as defined by the Americans with Disabilities Act, to the health or safety of the individual or others?

Yes No Examination remarks:

Signature of Physician _____ Date _____

Address of Physician _____ Phone _____

The Genetic Information Nondiscrimination Act of 2008 (GINA) prohibits employers and other entities covered by GINA Title II from requesting or requiring genetic information of an individual or family member of the individual, except as specifically allowed by this law. To comply with this law, we are asking that you not provide any genetic information when responding to this request for medical information. "Genetic information" as defined by GINA, includes an individual's family medical history, the results of an individual's or family member's genetic tests, the fact that an individual or an individual's family member sought or received genetic services, and genetic information of a fetus carried by an individual or an individual's family member or an embryo lawfully held by an individual or family member receiving assistive reproductive services. 29 CFR 1635.8(b)(1)(i)(B).

This form is due 60 days from the employee hire date. If the employee needs an extension, please call 594-1682.