Worksheet 1
Phoning in sick: worksheets

Worksheet 2

Task 1a

The receptionist asks Florence for some information. Listen to the phone call again. Tick (√) the information that the receptionist asks for.

1. How to spell Florence’s first name.
2. How to spell Florence’s family name.
3. Florence’s date of birth.
4. Florence’s address.
5. Florence’s boss.
6. Florence’s job.
7. Florence’s sickness.
8. The first day she was sick.
9. When she’s coming to work again.
10. A doctor’s note.

Task 1b

Here are the receptionist’s questions. Choose the correct words from the box to go in the gaps. Listen again to check.

1. Can you _______ your ________, please?
2. Who is your ________?
3. What’s the ________?
4. When can you _______ back to _________?

manager surname work spell some matter

Task 1c

Here are some other ways of asking the same questions. Match them with the questions from Task 1b. Write the number next to the question.

a) What’s the problem? _____

b) Who is your boss? _____

c) When are you working again? _____

d) Tell me the letters in your family name. _____
Phoning in sick: worksheets

Worksheet 3

R: Good morning. NECompany, how can I help you?

F: Hello. This is Florence Makumbo. I’m sorry. I’m not feeling very well. I can’t come to work today.

R: OK Florence. Just let me take a few details. First, can you spell your surname, please?


R: OK. Who is your manager?

F: Mark Smith.

R: OK. What’s the matter?

F: I’ve got a headache and I feel sick.

R: When can you come back to work?

F: I’m not sure. Not tomorrow. Probably the day after tomorrow.

R: OK Florence. If it’s less than 7 days we don’t need a Fit Note from the doctor. You just need to fill in a form when you come back.

F: OK.

R: I’ll let Mark know you can’t come in today. Take care of yourself.

F: Thank you. Bye.

R: Bye.
Worksheet 4

Task 4 – What’s the matter?
Write the number next to the correct picture.

1. I’ve had an accident
2. I’ve got back pain
3. I’ve got a cold
4. I’ve got diarrhoea & sickness
5. I’ve got a headache
6. I’ve got a rash
7. I’ve got flu
8. I’ve got a sore throat
9. I’ve got a stomach ache
### Worksheet 5

<table>
<thead>
<tr>
<th>Receptionist</th>
<th>Receptionist</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Hello. How can I help you?</td>
<td>- Hello. How can I help you?</td>
</tr>
<tr>
<td>- Who is your manager?</td>
<td>- Who is your manager?</td>
</tr>
<tr>
<td>- What’s the matter?</td>
<td>- What’s the matter?</td>
</tr>
<tr>
<td>- When can you come back to work?</td>
<td>- When can you come back to work?</td>
</tr>
</tbody>
</table>
**Worksheet 6**

**Task 5**

*Here is Florence’s Self-Certification Form. It has five mistakes. Listen to Florence talking to her manager and correct the mistakes.*

<table>
<thead>
<tr>
<th>NECompany</th>
<th>Self Certification Form</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>About you</strong></td>
<td></td>
</tr>
<tr>
<td>First name:</td>
<td>FLORENCE</td>
</tr>
<tr>
<td>Surname:</td>
<td>MAKOMBO</td>
</tr>
<tr>
<td>Payroll Number:</td>
<td>655321</td>
</tr>
<tr>
<td><strong>About your sickness</strong></td>
<td></td>
</tr>
<tr>
<td>Please give brief details of your sickness:</td>
<td>Stomach ache and sickness</td>
</tr>
<tr>
<td><strong>Date of your sickness</strong></td>
<td></td>
</tr>
<tr>
<td>These may be days you do not normally work</td>
<td></td>
</tr>
<tr>
<td>First day of sickness:</td>
<td>0 9 1 2 1 4</td>
</tr>
<tr>
<td>Last day of sickness:</td>
<td>1 1 1 2 1 4</td>
</tr>
<tr>
<td>Date returned to work:</td>
<td>1 2 1 2 1 4</td>
</tr>
<tr>
<td><strong>Signed</strong></td>
<td>F. Makumbo</td>
</tr>
<tr>
<td><strong>Date</strong>:</td>
<td>11 / 12 / 14</td>
</tr>
</tbody>
</table>
Here is Florence’s Self-Certification Form. Listen to her talking to her manager and fill in the form.

**NECompany Self Certification Form**

**About you**

First name:  
Surname:  
Title:  Mr / Mrs / Miss / Ms / other:  
Payroll Number:  

**About your sickness**

Please give brief details of your sickness:

**Date of your sickness**

These may be days you do not normally work

First day of sickness:  

Last day of sickness:  

Date returned to work:  

Signed:  
Date: