## SHARED LEAVE DONATION FORM ANNUAL EMPLOYEES Everett Public Schools

To:	Payroll		
From:	(Print name of donating employee)	(Employee ID#)	
Subject:	Request to transfer annual vacation a	and/or sick leave	
	Employees are eligible to share vacation l (Administrators, Custodians, Year Roun		
I am reque	sting that you autho rize me to transfer _	DAYS of my annual vacation	
leave and/o	or HOURS of my sick leave to:		
I wis	sh to donate my leave to(Print nam	e of recipient)	
leave or one participate in	that I must retain a minimum balance of ten (10 hundred seventy six (176) hours of sick leaven the leave sharing program. I have read and will be used in determining my eligibility to parlances.	e if I am donating sick leave in order to be understand the criteria (listed on the reverse	eligible to side of this
(Employee	Signature)	(Date)	_
(Payroll Su	pervisor/Designee)	(Date)	_
-	CW 28A.400.380, RCW 41.04.650-670 and Board Pware that the elimination period for long-term disa		
	PAYROLL U	SE ONLY	
L Req	uest Denied (Notification sent to donor)		
Reason for De	enial		_
(Payroll Supe	ervisor/Designee)	(Date)	_

## LEAVE SHARING DONATION ANNUAL EMPLOYEES ELIGIBLITY REQUIREMENTS

The following explanations are to be used to assist you in determining if you are eligible to participate in the leave sharing program:

- 1. If you accrue annual vacation leave and sick leave, you are eligible to donate annual vacation and/or sick leave to the leave sharing program.
- 2. Only days in excess of ten (10) days of annual vacation leave or one hundred seventy six (176) hours of sick leave may be used as donation to the leave sharing program. You may donate as many days/hours as you wish, as long as the leave balance does not drop below ten (10) days for annual vacation leave or one hundred seventy six (176) hours for sick leave.
- 3. A 'day' of annual vacation leave is determined by the length of the donating employee's regularly scheduled work hours per day.
- 4. The donated sick leave is on an hourly basis. Each hour shall consist of the donating employee's regularly scheduled work day at the time of conversion.
- 5. The donated annual vacation leave conversion shall be calculated on an hourly basis. Each day shall consist of the donating employee's regularly scheduled work day at the time of conversion.
- 6. Your annual vacation leave balance will be reduced by the number of days, converted to hours, donated to the leave sharing program.
- 7. All donated annual vacation leave and/or sick leave must be given voluntarily. No employee shall be coerced, threatened, intimidated, or financially induced into donating vacation leave and/or sick leave.
- 8. Annual vacation leave and sick leave donations will be withdrawn from the donor's leave balance(s) only as needed and used by the designated recipient and/or the shared leave pool. Only those employee's represented by the EEA Collective Bargaining Agreement may donate sick leave to the shared leave pool. All employees may donate leave to a designated recipient.
- 9. Donations shall be withdrawn in the order received.
- 10. You will be notified if any or all of your donated leave is not needed by the designated leave recipient, and such excess donations will not be charged against your leave balance.
- 11. Payroll does not disclose the name of a donating employee to the recipient. All leave donations are kept confidential.
- 12. Certificated staff may donate sick leave to classified staff and classified staff may donate sick leave and/or vacation to certificated staff.
- 13. Donation of leave is limited to employees within the same school district.

Any additional questions concerning the donation of leave should be direct to the Payroll Office at (425) 385-4160.