

# Request to Donate Leave



**Instructions:** Read the instructions on the reverse. Complete the top portion of this form, sign it and forward the document to Human Resources. Please print.

## Employee Donating Sick/Vacation Leave (Donor)

Name \_\_\_\_\_

Employee ID Number \_\_\_\_\_ Work Location \_\_\_\_\_ Work Phone \_\_\_\_\_

Assigned Hours Per Day \_\_\_\_\_ Job Title \_\_\_\_\_

### I wish to donate to:

Recipient's Name \_\_\_\_\_

Recipient's Work Location \_\_\_\_\_

- OR -

District Shared Leave pool

Check here if recipient can be notified of your donation.

### I agree to donate the following days:

Sick Leave

\_\_\_\_\_ Total days I wish to donate

Vacation Leave

\_\_\_\_\_ Total days I wish to donate

Signature \_\_\_\_\_ Date \_\_\_\_\_

### Human Resources Department Use Only

Total number of hours donated during the last 12 months (not to exceed 6 sick leave days) \_\_\_\_\_

Sick

Vacation

Beginning hours balance as of: \_\_\_\_\_

Less hours transferred \_\_\_\_\_

Ending hours balance \_\_\_\_\_

Required minimum balance of 22 sick leave days after transfer (min = hours/day \_\_\_\_\_ x 22 = \_\_\_\_\_)

Required minimum balance of 10 vacation days after transfer (min = hours/day \_\_\_\_\_ x 10 = \_\_\_\_\_)

Meets requirement:  Yes  No

Signature \_\_\_\_\_

Date \_\_\_\_\_

**Spokane Public Schools**  
**Request to Donate Leave**

Please be sure to read all information below.

General requests for donation of sick leave or vacation leave:

1. Donated leave must be in full day increments.
2. Eligible employees may donate either to an individual or to the district wide pool.
3. Applications to donate leave which do not meet criteria herein will be returned unprocessed to the donor.
4. Applications to donate to specific individuals will not be processed unless the designated recipient is approved for leave sharing within 30 days.

An employee must meet the following criteria to be eligible to donate sick or vacation leave:

**Sick Leave**

You may donate sick leave under the following criteria:

1. You may not donate more the six days during each calendar year.
2. Your donation must not cause your sick leave balance to drop below 22 days.
3. Sick leave donations will reduce your sick leave balance eligibility for annual sick leave sellback.

**Vacation**

You may donate vacation under the following criteria:

1. You have a balance of more than 10 vacation days leave.
2. Your donation must not cause your vacation balance to drop below 10 days.
3. You may not donate excess vacation that you would otherwise lose because you are unable to use it due to a carryover requirement.