

ESCONDIDO UNION SCHOOL DISTRICT

Catastrophic Leave Bank Donation Form

The purpose of the Catastrophic Illness/Sick Leave Bank is to create a bank of sick leave days from which participants may apply for additional sick leave when suffering from a catastrophic illness or accident and have exhausted all other paid leave. Your donation is voluntary. Please read below for details on this program.

- Employees may donate one (1) day during each contribution period.
- Employees must have at least twenty (20) days of accrued sick leave to make a donation.
- A donation to the Bank will be a general donation and shall not be donated to a specific employee for his/her exclusive use.
- Only employees who have donated to the Bank may apply to withdraw days from the Bank.
- Contributions shall be made between September 1 and December 1 of each school year. Employees returning from an extended leave, which included the enrollment period, will be permitted to contribute within 30 calendar days of beginning work.
- Additional days of contribution shall be solicited from within the bargaining unit if the number of days in the Catastrophic Leave Bank fall below 250 or fifty percent of the initial contribution totals, whichever is greater.

\_\_\_\_\_  
Employee Name (print)

\_\_\_\_\_  
Site

\_\_\_\_\_  
Employee ID Number

\_\_\_\_\_  
School year

I wish to donate one (1) day of sick leave to the Catastrophic Sick Leave Bank. I have read the above and understand the conditions that apply to this donation.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

For Human Resources and Payroll Use Only

Number of Accrued S/L Days: \_\_\_\_\_

Verified by: \_\_\_\_\_

Eligible to donate? Yes  No  Date entered in Bank: \_\_\_\_\_ by: \_\_\_\_\_