

# Wayne State College

## Shared Leave Donation Form

(effective July 1, 2005)

Donor Name \_\_\_\_\_  
(Please print)

The Shared Leave Pool is a bank of donated time off that may be used for employees who face serious medical conditions and have exhausted their sick, vacation, and compensatory time off. A committee comprised of the Director of Human Resources, the Payroll Manager, one support staff member, one tenured faculty member, and one professional staff member will determine whether or not a request for leave donations should be approved, and if so, how many days of crisis leave should be granted. The identity and condition of recipients will be confidential.

Professional, Support staff      may donate any amount of vacation leave in full-day increments (eight hours).

Faculty      may donate one (1) day of sick leave per calendar year.

In either case, the donation may not cause the donor's leave balance to fall below 50% of the donor's annual accrual.

Donations are transferred on a day-by-day basis, regardless of differing pay rates.

Donations are reflected as a deduction from the leave balance of the donor employee when the Shared Leave Donation Form is received by Human Resources (Hahn Building, Room 211)

### **For Professional, Support Staff:**

I wish to donate \_\_\_\_\_ day(s) of vacation to the Shared Leave Pool.

Signature of Donor \_\_\_\_\_ Date \_\_\_\_\_

### **For Faculty:**

I wish to donate one day of sick leave to the Shared Leave Pool.

Signature of Donor \_\_\_\_\_ Date \_\_\_\_\_

**Once processed and transferred, donations are irrevocable. This program will be administered in accordance with Board Policy 5612. Please refer to this policy for more information.**

**Please forward to the Human Resources Department  
(Any questions, call 402-375-7403)**