



EMPLOYEE SICK LEAVE BANK ENROLLMENT FORM

Please complete this form if you are interested in becoming a member of the Employee Sick Leave Bank. The enrollment period for employees that are not members of the Employee Sick Leave Bank is during the months of July and September. The Employee Sick Leave Bank Guidelines can be found on the District website under the Human Resources tab. Please be aware that once days are donated they are non-refundable.

This form must be <u>returned</u> to Human Resources Office by the end of the enrollment period.	
I would like to become a member of the Employee Si (Employees can donate up to 5 total leave days of any	
Please put the number of days next to your choice.	
Sick Day(s)	
Personal Day(s)	
Vacation Day(s)	
Employee's Signature	Date
Print Name	School/Department

Please return original form to Diane Gresham, Benefits Specialist (X4122)