

11/26/18 Item # 19 w 1:04
HR

DONATION OF SICK LEAVE HOURS

County employee may donate Sick Leave Hours to another county employee with a catastrophic illness, which shall be defined as a terminal, life-threatening, and/or severe condition or combination of conditions affecting the mental or physical health of the employee that requires the service of a health care practitioner for a prolonged period of time. Examples of catastrophic illness include, but not limited to:

- Strokes with residual paralyzed or weakness;
- Incapacitating heart attack or stroke;
- Major Surgery such as hysterectomy, mastectomies, heart bypass, prostate;
- Debilitating cancer;
- Hepatitis, broken hip, car accident requiring hospitalization.

County employees may contribute not less than 4 hours not more than 32 hours. An employee is limited to receiving not more than 240 hours in a year.

Donation of Sick Leave Hours

(All shaded areas are required)

Name _____	Department _____		
Home Address _____			
No. and Street Name _____	City _____	State _____	Zip Code _____
D.O.B. _____	Employee ID# _____	S.S. # (Last 4 Digits) _____	

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The donated hours may only be granted to and used by an employee with a Catastrophic Illness or Injury as define in policy.

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I, _____, wish to donate Sick Leave Hours to the following employee _____ in the amount of _____ days.

Employee Signature

Date

Total number sick leave hours accrued: _____

Total number sick leave hours contributed: _____