Proposed Policy of Donation of Sick Leave Hours

County employees 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 and any other matter incident thereto. Examples of catastrophic illness include, but are not limited to:

- Strokes with residual paralyzes 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,

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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- Hepatitis, broken hip, car accident requiring hospitalization.

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

The employee may contribute not less than one (1) day not more than (5) days.

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: _____

    Total number sick leave hours balance: _____