



## LEAVE DONATION

REV 03/12

Employees may donate up to a MAXIMUM of 10% of their accumulated paid or sick leave hours, but no more than what they have actually accrued at the time of the donation.

Donor's Name: \_\_\_\_\_ Date Submitted: \_\_\_\_\_

Recipient's Name \_\_\_\_\_  
(Please Print)

NUMBER OF PAID LEAVE HOURS DONATED: \_\_\_\_\_

NUMBER OF SICK LEAVE HOURS DONATED: \_\_\_\_\_

Leave donations are made on a confidential and anonymous basis. Donations will be applied to the recipient employee on a first-donated, first-used basis. Any unneeded donated time will be returned to the donor.

I certify that I have enough leave to cover this donation:

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

I have verified the number of hours of leave available below

\_\_\_\_\_  
Supervisor Signature

\_\_\_\_\_  
Date

Approved

Not Approved

Reason for Disapproval \_\_\_\_\_

Donor	No. of Hours Available	No. Of Hours Donated	Ending Balance	Total Hours Used	Date Used/ Donated	Recipient
Paid Leave						
Sick Leave						