



## Shared Leave Donation Form

Please submit to the Benefits Office, 225 King Building

Please review Personnel Information Memoranda 29 for information regarding the Shared Leave program. This can be found online at [www.uncc.edu/humanresources/policies/pims.htm](http://www.uncc.edu/humanresources/policies/pims.htm).

I understand:

- Family and nonfamily member donors may donate sick leave, vacation, and bonus leave according to PIM 29, University Policy Statement #97, and State Personnel Manual, Section 5, Voluntary Shared Leave. I certify that I have read and understand these policies as they relate to Shared Leave donations.
- The minimum amount of sick leave, vacation, or bonus leave to be donated is four hours.
- The maximum amount of sick leave that can be donated by a family member is an amount that can be given without reducing the donor's sick leave balance below 40 hours. The maximum amount of sick leave that can be donated by a nonfamily member is five days.
- The maximum amount of vacation that can be donated by a family or nonfamily member is an amount that does not exceed the recipient's annual vacation accrual rate and does not reduce the donor's vacation balance below one-half his or her annual vacation leave accrual rate. Bonus leave may be donated without regard to this limitation.
- The donor cannot receive remuneration for sick, vacation or bonus leave donated.
- Since sick leave is used to increase creditable service for members of the Teachers' and State Employees' Retirement System, I understand that donation of sick leave may have an impact on my State retirement credit when I retire.

Donor Name:		UNC Charlotte ID Number:	
Donor Signature:	Date:	Department/Office:	

Under the provisions of the Voluntary Shared Leave Program, I request to donate:

<b>Family Member</b>	<b>Nonfamily Member</b>
_____ <b>Hours of Sick Leave</b>	_____ <b>Hours of Sick Leave</b>
_____ <b>Hours of Vacation</b>	_____ <b>Hours of Vacation</b>
_____ <b>Hours of Bonus Leave</b>	_____ <b>Hours of Bonus Leave</b>

To be transferred from my account to the account of \_\_\_\_\_ whom I understand to be an approved recipient of shared leave.