



DeForest Area School District Sick Leave Donation Form

Employees are provided the opportunity to voluntarily donate unused sick leave days credited in the current year to another employee upon exhaustion of that employee's paid leave reserve. DAEA and DASS specific collective bargaining contract provisions apply pertaining to sick leave donation. Please reference your appropriate Collective Bargaining Agreement for full provisions. The donor has complete control over who receives the benefit of his/her donated days. Donated days must be used within the current contract year. To exercise this right, complete the following and submit to Human Resources:

I, _____ voluntarily donate _____ sick days **OR** _____ sick hours
Donating Employee # of days # of hours

to _____ for the following reasons (check all that apply):
Receiving Employee

- Birth / Adoption / Pre-Adoptive Foster Care
- Ordinary short-term illness of Employee
- Serious Health Condition of Employee
- Ordinary short-term illness of Immediate Family Member
- Serious Health Condition of Immediate Family Member
- For a Qualifying Exigency due to the military active duty status or call to active duty status of a spouse, son, daughter or parent
- To Care for Family Member or Military Service member with Serious Health Condition

I understand that these days will be taken from my available current year sick leave days. The contract year of donation and use is: _____.

Signature of Donating Employee

Date

HR Department Use Only

Date received in Human Resources Department: _____

Date days recorded in system for Donating Teacher: _____

Date days recorded in system for Receiving Teacher: _____

Approval/ Signature Director or Benefits Specialist