

Request to Withdraw Days from the Sick Leave Bank

TO: Benefits Coordinator DATE: _____

FROM: _____

SCHOOL: _____

Number of SLB days requested: _____

All employees are required to exhaust all personal sick leave before accessing SLB days.

What is the date that you will use your last personal sick day? _____

Reason for leave (Please provide a brief description of the medical situation.):

Employee Signature

Date

*****You must also provide a note from your doctor explaining the medical situation.*****

SLB Committee Decision:

Approved: _____

Denied: _____

Reason for Denial:

Signature - SLB Committee Representative

Date

10.8 Sick Leave Bank (SLB)

A. ELIGIBILITY

A Staff Member is eligible for SLB if, but only if, the Staff Member (1) is currently enrolled as a member of the SLB, (2) has exhausted his/her accumulated sick leave, and (3) is absent from work because of a catastrophic illness of his/her person or mother, father, spouse, child or dependent living in the Staff Member's household. Catastrophic illness or injury is as determined by the committee established under paragraph E. Examples include, but are not limited to, heart attack, cancer, car accident, major surgery, etc. This program is not to be used for short-term illnesses.

B. PARTICIPATING STAFF MEMBERS

1. Enrollment. New Staff Members shall be provided with information relative to SLB at the time of the initial employment and shall have two calendar months from the first day of the month following their initial date of employment to file their application with the office of the Superintendent. Once every five (5) years, Staff Members not enrolled in SLB will have the opportunity to enroll in SLB through an open enrollment. The first open enrollment year will be 2006. Staff Members will be notified of the open enrollment period in the September "UPDATE" newsletter. Staff Members shall have until December 1st of the same year to enroll in SLB. Enrollments shall be filed with the office of the Superintendent.
2. Withdrawal. A participating Staff Member may withdraw at any time by giving written notice of withdrawal to the office of the Superintendent. The withdrawal shall not be effective until the first day of October following the delivery of the notice of withdrawal. Until the effective date of withdrawal, the participating Staff Member shall be subject to the assessment provisions of paragraph C 2. A participating Staff Member who withdraws forfeits all days contributed to the reserve and cannot resume participation at a later date until the next open enrollment period.

C. RESERVE

1. Formation. In order to establish and maintain a reserve each participating Staff Member shall initially contribute two (2) sick leave days to the reserve.
2. Maintenance. If at any time, the reserve falls below thirty (30) days, all participating Staff Members shall be assessed two (2) days. If such assessment does not raise the reserve to one hundred (100) days, SLB shall terminate in accord with paragraph 3 below. Any participating Staff Member who has exhausted his/her sick days and has no days available for such assessment shall be temporarily suspended from participation in SLB until the participating Staff Member has accumulated two (2) additional days for assessment at which time the participating Staff Member shall be assessed and reinstated.
3. Termination. If the number of participating Staff Members in this program is not sufficient to support the assessment for maintenance as set forth in paragraph 2 above, the program shall automatically terminate and no credit will be given to any participating Staff Member in the program for days remaining in the reserve if the number of days divided by the participating Staff Members is less than one (1). If said number is one (1) or more, then the days remaining in the reserve shall be divided equally among participating Staff Members.

D. PAYMENT OF BENEFITS.

1. A participating Staff Member who is found to qualify for days from the SLB will have those days credited to his or her normal sick day account to be used for absences.
2. A participating Staff Member shall be eligible for the SLB for no more than thirty (30) days which may be assessed in one or more illnesses. The total days for all illnesses in no event shall exceed thirty (30) days.

E. OPERATIONAL GUIDELINES

The SLB committee shall govern the operation of the SLB Program. It shall consist of three members: (1) the Superintendent, (2) the President of the Union or his/her designee, and (3) Chairperson of the Self Insurance Committee or his/her designee. A Staff Member who has exhausted his/her personally accumulated sick leave may make a written application to the Committee for withdrawal of days from the reserve. The Staff Member shall state the reason for the inability to work and the number of days requested from the reserve. Before granting the request, the SLB committee must elicit affirmative answers to the following:

1. Is the Staff Member listed as a current member of the SLB Program?
2. Has the Staff Member exhausted his/her personally accumulated sick leave?
3. Is the absence from work due to catastrophic illness or injury to the Staff Member or a Staff Member's mother, father, spouse, child, or a dependent living in the Staff Member's household?