

Model Tool: Catastrophic leave program donation form

Why you need this form:

Leave-sharing programs must meet certain criteria in order to be valid under the Internal Revenue Service's general tax rules and under various state laws.

How this form helps you:

A leave-sharing program must be in writing and created as a "leave bank" into which employees may deposit donated leave.

How to use this form:

Check with your state law to learn what type of leave may be donated, and adapt this form to suit the specifics of your state and your practice.

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Employee name: _____

ID#: _____

Date eligible for benefits: ____/____/____

I wish to donate the following number of hours to the Catastrophic Leave Program. I understand that this is not a guarantee of future leave availability and that all leave requests are subject to approval and available bank balance.

I have been employed in a benefit eligible position for a minimum of one year and have a minimum combined leave balance of 80 hours.

Time to be donated:

_____ Hours from sick leave

_____ Hours from vacation leave

Signature: _____

Date: _____

Payroll Use:

Date received: _____

Balance: Sick _____ Vacation _____

Hours deducted: _____ Date: _____ By: _____

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