

Donated Sick Leave Form

The completed form with all necessary approvals should be submitted to Human Resources

Part A – To be completed by contributing employee

Name _____ GID # _____

Department _____

I wish to donate ____ (maximum of 40) hours of sick leave to _____

I understand that sick leave donations are voluntary. Donations can be declined by the recipient, or denied by the department head/director and dean/vice president

Contributing Employee Signature

Date

Part B – To be completed by receiving employee's department

Name _____ GID # _____

Department _____

Both the department head/director and dean/vice president should initial below the appropriate option.

1. Approval of total hours contributed in Part A _____
2. Denial of total hours contributed in Part A _____
3. Approval of only _____ hours contributed in Part A _____

Signatures of the department head/director and dean/vice president indicate accepting responsibility for covering the costs of the donated sick leave to the receiving employee.

Department Head/Director

Date

Dean/Vice President

Date

In the event some or all sick leave donations are denied, the department head/director and dean/vice president should indicate the denial and amount of leave denied, and return the form to the receiving employee and copy the Chief Human Resources Officer.

Part C – To be completed by Human Resources

Upon receipt of the approved Donated Sick Leave Form, Human Resources will verify employees meet the eligibility requirements to donate or receive donated sick leave in accordance with MSU Policy 1045.00 - Donated Sick Leave. Donated sick leave will be deducted from the contributor's sick leave and credited to the recipient of the sick leave in the order the Donated Sick Leave Forms are received, and on an as-needed basis at the end of each pay period.

Contributor:	Eligibility date _____	Recipient:	Leave Accruals
	Sick Leave balance _____ as of _____		
	Number of donated hours _____		
	Ending Sick Leave balance _____		