

Request to Utilize District
Sick Leave Pool – Ore City ISD

I have received a request to start a sick leave pool for

According to board policy DEC(LOCAL), the District sick leave pool shall be established from voluntary donations by the District staff to assist a fellow employee suffering from personal illness or disability, including pregnancy-related disability. The sick leave pool shall not be used to extend leave due to maternity or childbirth without complications. Pooling may be requested when an employee has exhausted his or her state and local leave. The employee may receive a maximum of 30 days from the pool.

The sick leave pool shall be composed of voluntary contributions by District staff for a specific individual and donated days shall be designated to a specific pool. No staff member shall be allowed to contribute more than two of his or her local leave days to a pool per school year. A maximum of 30 days may be contributed to an individual pool.

The sick leave pool ceases to exist when the employee in whose name the pool was established returns to work or when each voluntary donation reaches the two-day maximum contribution and the sick leave pool is exhausted. Unused sick leave pool days shall revert to the donors and shall be divided proportionately according to the amount contributed. Reimbursed days shall be divided in increments of no less than one-half days. A sick leave pool shall not remain in existence for general use.

If you would like to donate any of your local days to:

Please fill out the form below, sign, and return the entire form to the Central Office. Please be aware that any donated local days will be deducted from your local days.

I, wish to donate the following local leave days to the pool established for _____

Number of days of local leave I wish to donate: 1 day 2 days

Signature _____ Date _____

For Payroll use only:

Employee: Number of Local Days Available
Number of local days used for sick leave pool