



SOUTHERN AVENUE CHARTER SCHOOL

SICK LEAVE BANK DONATION POLICY AT A GLANCE

1 ELIGIBILITY



Must have minimum balance of **10** sick leave days



Must donate at least **1** day



Max donation: **5** days per calendar year



Can donate multiple times to the same individual

2 HOW IT WORKS

1



Step 1:
Complete Sick Leave Donation Agreement Form

2



Step 2:
HR Representative signs form

3



Step 3:
Submit to Payroll Specialist

4



Step 4:
Verify sufficient sick leave balance

5



Step 5:
Approval by appropriate authority

6



Step 6:
File copy placed in donor & recipient personnel files

7



Step 7:
Payroll processes adjustment and final verification

3 KEY RULES



Donation is voluntary



HR keeps sick leave balances confidential

GENERAL NOTES



Payroll verifies balance before deduction



Donations are processed officially through HR & Payroll



SOUTHERN AVENUE CHARTER SCHOOL

SICK LEAVE BANK DONATION FORM

The Sick Leave Bank allows eligible employees to donate accrued sick leave to support colleagues who experience a catastrophic illness or injury.

Please complete this form to donate sick leave.

1 DONOR INFORMATION

Name (Print): _____ Employee ID: _____

Department/Position: _____

Work Location: _____ Date: _____

2 DONATION DETAILS

I would like to donate:

_____ day(s) of sick leave
(Minimum 1 day)

Donation will be applied to:

- Any eligible employee in need
 A specific employee (if permitted by policy)

If specific employee is permitted, name (optional): _____
(All donations are confidential.)

3 ACKNOWLEDGEMENT

I understand that:

- My donation is voluntary and cannot be revoked.
- Donated sick leave will be used in accordance with the Sick Leave Bank Policy.
- My remaining sick leave balance must comply with the minimum balance requirement after this donation.

I have read and understand the Sick Leave Bank Policy.

4 SIGNATURE

Donor Signature: _____ Date: _____

By signing above, I authorize Southern Avenue Charter School to deduct the donated sick leave from my accrued balance and add it to the Sick Leave Bank.



Thank you for supporting your colleagues and our school community.
Your generosity makes a difference.

Return completed form to: Human Resources | hr@sacsmemphis.org | 901.743.7335