

## **HUMAN RESOURCES**

## **Donation of Sick Days to CSEA Sick Bank**

Please Print		
Name		
Employee Number		
Collective Bargaining Unit	[ ]	Retiring from CSEA (5 days maximum)
		Anticipated date of retirement
		CSEA (current/active member)
		Educational Administrators
	l J	Technical Administrators
Number of Days to be Dona	ted	
utilized. At no point in time donation does not entitle mo process. I further understa	can I e to an nd that ure unl	the donation will remain in the CSEA Sick Bank until request a return of my days. I also acknowledge that my y authority in the sick bank committee's decision making t my donation does not entitle me to sick days from the CSEA less I follow the established procedures for obtaining such A Bargaining Unit.
Donating Employee's Signar	ture	Date
CSEA Union President's Signature		Date
Official Office Use Only	••••	
Date Received by Human Ro	esourc	es
Date Sent to Payroll		
Date when Days were added	l to the	CSEA Sick Bank_