

**ENROLL NOW!  
BFT/BUSD - SICK LEAVE BANK**

**- OPEN ENROLLMENT -  
NOVEMBER 1 - 30, 2016**

**PURPOSE**

The Sick Leave Bank was negotiated and became part of the contract in 1985 when some of our members were seriously ill, had used up all their sick leave days and were unable to claim disability or worker's compensation. This voluntary enrollment plan, open to all members of the bargaining unit, was organized to generate a pool of sick leave days. These days will be available to qualified applicants to apply toward their own long-term leave in the event of a prolonged illness or injury.

**ELIGIBILITY AND MINIMUM PLEDGE**

All eligible staff in the bargaining unit may voluntarily become members of the Sick Leave Bank. You may have any number of sick leave days accumulated before you join the Sick Leave Bank. The minimum pledge for a first-time member of the Sick Leave Bank is a pledge of one (1) day per year for each of three (3) successive years. You are a member in good standing of the Sick Leave Bank once your pledge is received.

- No days will be returnable while the bank is still in operation.
- Should the program be terminated, days will be credited to donors on a pro-rata basis of the days remaining.

If you have any questions regarding the Sick leave Bank, call the BFT Office, 549-2307. A member of the Sick Leave Governing Board or one of the BFT staff/officers will be glad to answer all questions.

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**Please fill out completely - RETURN VIA INTRA-DISTRICT MAIL TO BFT OFFICE**

I, [PRINT] \_\_\_\_\_ Employee ID#\* \_\_\_\_\_ have read the regulations and agreements governing the SICK LEAVE BANK which accompanied this application. I understand and accept them. I voluntarily wish to pledge sick leave days as follows:

Year 1: 2016-17 - 1 DAY  
Year 2: 2017-18 - 1 DAY  
Year 3: 2018-19 - 1 DAY

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

SCHOOL \_\_\_\_\_

-----AND/OR-----

Any new or continuing Sick Leave Bank member can voluntarily donate additional days by filling out this section below.

I, [PRINT] \_\_\_\_\_, am a member of the Sick Leave Bank, and

wish to pledge \_\_\_\_ additional day(s). SIGN & DATE \_\_\_\_\_

\*Check your latest paycheck stub for your employee ID #.

**IF YOU HAVE ALREADY SIGNED UP AS A MEMBER NOW OR IN A PREVIOUS  
YEAR YOU DO NOT HAVE TO SIGN UP AGAIN.**

# SICK LEAVE BANK AGREEMENT AND REGULATIONS

**PROCEDURES:** Applications for Sick Leave Bank donations will be considered on a first-come, first-served basis. Applications must include medical verification. Sick Leave Bank days will not be usable until personal sick leave days are exhausted.

- The maximum allocation per person on initial application shall be twenty (20) days.
- The Governing Board shall have the right to ask for periodic verification of days already granted; days may be granted provisionally, with proof of need at any given point within the twenty (20) days required. Days may be reclaimed if need cannot be verified. The Board may require verification of need for sick leave days beyond a doctor's certification, (e.g. a letter explaining the specific nature of the problem and/or evidence that the applicant was indeed home sick or following a legitimate regime outlined by a doctor). The Governing Board shall have the authority to accept evidence from other sources that the individual did not require sick leave days and reclaim days granted if need is not satisfactorily verified.
- Extensions may be granted upon a note of reapplication. There must be at least fifty (50) days in the bank for an extension to be granted. A maximum of forty (40) days per person shall be allowed.
- The bank must have at least twenty (20) days on account at the beginning of the second semester of the school year and at least ten (10) days at the end of the school year.
- The Governing Board shall notify the BFT office and the BFT office shall notify the applicant and the BUSD Personnel Office of all allocations within three (3) working days of the decision.
- If more than one first-time applicant is being considered at the same time and there are not enough days to fill each request, the available days will be divided equally or proportionately, as is consistent with the requests, between or among the applicants.
- Any person using days from this bank must agree to repay the days at the rate of two (2) days per school year upon their return to work and, when they have accumulated twenty-two (22), days, at the rate of ten (10) days per year. If, upon retirement or resignation, a recipient has accumulated sick leave, they must repay the bank whatever days that accumulated leave will cover.
- Any one time exception to these regulations and agreements must be approved by the Governing Board and then approved by a majority vote of the Sick Leave Bank donors. The vote will be conducted through the school mails.

All participants must sign the application (see reverse side) which will be considered an acknowledgment that they have read and accepted all the rules and regulations set forth in this packet and the right of the Governing Board to interpret and administer them.

**YOU MAY WANT TO MAKE AND KEEP A COPY OF THIS INFORMATION FOR FUTURE REFERENCE.**