

CITY OF WHITING EMERGENCY LEAVE DONATION FORM

Instructions:

This form must be completed in its entirety whenever an employee wishes to donate one (1) or more of their personal vacation leave or sick leave days to another employee who is currently on Emergency Leave. The completed form should be forwarded to the Clerk-Treasurer for processing.

SECTION 1: TO BE COMPLETED BY THE DONATING EMPLOYEE

Date:

Donating Employee name:

Donating Employee Department:

Donating Employee signature:

Number of vacation days donating:

Number of sick days donating:

Recipient Employee on Emergency Leave:

SECTION 2: TO BE COMPLETED BY THE CLERK-TREASURER

Does the Donating Employee have sufficient days available to transfer?

Yes No

Transfer completed and Leave records updated:

Date:

Payroll Clerk signature:

Date:

Distribution: Original – Clerk-Treasurer’s Office; Donating Employee Personnel File
 1 Copy – Clerk-Treasurer’s Office; Recipient Employee Personnel File
 1 Copy – Employee