

## SICK LEAVE DONATION AND AUTHORIZATION REQUEST FORM

At times, an employee may require extended leave due to his or her own personal needs, or to care for a family member. When an employee is on FMLA, they must use their "Sick Leave" to cover any employment days missed.

Accrued and earned Sick Leave may be "donated" from one employee to another in certain circumstances when the Board of County Commissioners has approved the "transfer". If approved, the donation of sick leave will reduce the donating employee's sick leave hours and increase the sick leave balance of the recipient employee. Once the "donation" has been approved, and the transaction has been processed, the donation will be final. The donation can't be reverted back to the individual who donated the time, nor can the donated hours be re-donated to another employee even if the donated sick time wasn't utilized by the original receiving employee. The maximum number of days an employee is able to donate is 30 days (240 hours max).

<b>Name of Employee to Receive Sick Leave Hours:</b> <u>Hallie Coulter</u>	<b>Department:</b> <u>DHS</u>
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(Print Name)

<b>Name of Employee Donating Sick Leave Hours:</b> <u>Kurt Liebchen</u>	<b>Department:</b> <u>DHS</u>
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(Print Name)

I hereby request 16 hours of accrued and earned sick leave to be deducted from my accrual balance. I understand that once this transfer has been processed that I cannot revoke or change this request.

Kurt Liebchen

2-20-2025

Donating Employee Signature

Date Signed

Dreama [Signature]  
Signature of Supervisor

2/20/25  
Date Signed

Signature of BOCC Chairman

Date Signed

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<b>Name of Employee to Receive Sick Leave Hours:</b>	<b>Department:</b>
<u>Hallie Coulter</u>	<u>APS</u>

(Print Name)

<b>Name of Employee Donating Sick Leave Hours:</b>	<b>Department:</b>
<u>Dreama Ortiz</u>	<u>CW</u>

(Print Name)

I hereby request 40 hours of accrued and earned sick leave to be deducted from my accrual balance. I understand that once this transfer has been processed that I cannot revoke or change this request.

Dreama Ortiz  
Donating Employee Signature

2/20/25  
Date Signed

[Signature]  
Signature of Supervisor

2/20/25  
Date Signed

Signature of BOCC Chairman

Date Signed