

CITY OF MAUSTON EMPLOYEE SICK LEAVE DONATION AGREEMENT
(To be Completed by Donating Employee)

The donation of sick leave is strictly voluntary and can only be donated for a qualifying medical event as determined by the City Administrator. The recipient must have exhausted all paid leave to receive donated sick leave.

Date: _____

I, _____, wish to donate _____ hours of sick leave to

(name)

_____.

(name of recipient)

I understand that I can donate a maximum of eighty (80) hours in a calendar year, and must retain 40 hours for personal use, or 48 hours for personal use if I'm an employee of the Mauston Police Department. The donation of sick leave is on an hourly basis, without regard to the dollar value of the donated or used leave. Employees cannot borrow against future sick leave. Employees who are currently on an approved leave of absence cannot donate sick leave. I am donating this leave of my own free will and understand that sick leave deducted from my leave balance may not be returned.

Donating Employee's Signature

Date

1. _____
Witness Date

2. _____
Witness Date

City Administrator's Signature

Date

RETURN TO THE CITY ADMINISTRATOR'S OFFICE.