

**VOLUNTARY SICK BANK  
DONATION FORM**

DATE SUBMITTED: \_\_\_\_\_

NAME (Please Print): \_\_\_\_\_

LOCATION: \_\_\_\_\_ POSITION: \_\_\_\_\_

NUMBER OF DAYS DONATED: \_\_\_\_\_ DATE FORM RECEIVED IN HR: \_\_\_\_\_

EMPLOYEE TO RECEIVE DONATED DAYS: \_\_\_\_\_ LOCATION: \_\_\_\_\_

***GUIDELINES FOR TENURED EMPLOYEES WHO DONATE PERSONAL ILLNESS DAYS:***

**INDIVIDUALS AND GENERAL SICK BANK DONATIONS**

1. Only personal sick days may be donated.
2. All donated sick days are voluntary.
3. An employee must have a balance of twenty sick days remaining in their personal attendance bank after donating any sick days to another employee or donating to the general sick bank.
4. Employees will inform the Sick Bank Committee *via email* ([sickbank@orange.k12.nj.us](mailto:sickbank@orange.k12.nj.us)) *only*, indicating the number of sick days to be donated and stating the name of the employee who has been identified and approved to receive such donated sick days or indicating the days to be donated to the general Sick Bank.
5. Once a donation is accepted and approved by the Voluntary Sick Bank Committee, they cannot be rescinded/returned.
6. Only full sick day increments will be donated.

**DONATED SICK DAYS TO INDIVIDUAL EMPLOYEES**

7. Donated sick days to an individual employee will be used in the order that they are received, one day at a time in a chronological order, first come basis.
8. If an employee approved to receive sick days from the Sick Bank leaves the district prior to the end date of the approved sick leave, any unused sick days may be returned to the donor employee(s) who donated the sick days on a pro-rated basis.
9. Employees will donate only to those employees they have identified to receive sick days, pursuant to the employee's eligibility to received such donated sick days.

Employee Donor Signature: \_\_\_\_\_

General Sick Bank: [  ] [  ] Total Days Donated: \_\_\_\_\_

Designated Employee: [  ] [  ] Total Days Donated: \_\_\_\_\_

Designated Employee's Name (Please Print): \_\_\_\_\_

Sick Bank Chair Signature \_\_\_\_\_ Date: \_\_\_\_\_

XC: Voluntary Sick Bank File

Personnel File