



Catastrophic Leave DONATION Form

Rescue Union Federation of Teachers Catastrophic Leave Program

Name: _____ Date: _____

School: _____

Your number of accumulated sick days: _____. (Full-time or part-time employees must have a minimum of 9 day remaining after the donation).

Number of days you wish to donate to the Catastrophic Leave Bank: _____

Signature of Employee

Date

Donation Received: _____

RUFT Catastrophic Coordinator

Date

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Important Notes:

- Remember your accumulated sick leave days count as service credit under STRS.
- Transfer of sick days to this program is irrevocable. In the event there is dissolution of the program, days remaining will be returned based on the proportion of those donated.
- For additional information, see Article XXXIII or the RUFT/RUSD Contract Agreement.
- The enrollment period for the Catastrophic Leave Bank is during the first four months of your employment each year.
- Additional voluntary donation after your initial enrollment may be made at anytime.