



Village of Mount Prospect
Mount Prospect, Illinois

VOLUNTARY SICK LEAVE DONATION FORM

All eligible full-time employees wanting to donate sick time must contribute under the guidelines of the Voluntary Sick Leave Donation Policy. Donated sick leave hours must be in increments of eight (8) hours with a maximum of forty (40) hours per occurrence/request. *Participation is completely voluntary.*

Employee Name

Dept.

1. Name of employee that you are donating sick time to:

2. Your total number of sick leave hours prior to donation:

3. Number of sick hours to donate. **Please check one.**

☐ 8 hours ☐ 16 hours ☐ 24 hours ☐ 32 hours ☐ 40 hours

4. Number of base hours worked annually. **Please check one.**

☐ 1950 (7.5 hr. shift) ☐ 2080 (8 or 10 hr. shift) ☐ 2600 (24 hr. shift)

I understand that the time I am voluntarily donating (accrued an unused) sick time and that this time will be forfeited by me regardless of whether or not the donee uses this time.

Employee Signature

Date

Upon approval, donated sick time will be deducted from your sick leave accrual. Please return completed form to the Human Resources Division.