

I. DONOR INFORMATION and ACKNOWLEDGEMENT

Donor Name _____

Position _____ Dept _____

To be eligible to donate leave, employees must maintain a balance of at least forty (40) hours in each of their own leave accounts.

Minimum donation is 4 hours; hours above the 4 hour minimum may be donated in 1-hour increments (e.g., 5, 6, 7, etc.).

I hereby acknowledge that I have read and understand the *City of Creedmoor Personnel Policy, Article VI, Section 27: Shared Leave* dated July 1, 2018 and wish to donate leave in accordance with the policy to the following approved recipient:

_____ Hours of Vacation Leave

_____ Hours of Sick Leave

_____ Donor Employee Signature

_____ Date

II. AUTHORIZATION and APPROVAL

- Donor has sufficient leave balances to donate the leave time as stated above *and* retain the minimum 40-hour balance requirement in his/her own accounts.
- Donor does not have sufficient leave balances to donate the leave time as stated above *and* retain the minimum 40-hour balance requirement in his/her own accounts.

Additional Comments _____

_____ Human Resources Director Signature

_____ Date

Approved

Disapproved

Additional Comments _____

_____ City Manager Signature

_____ Date