

GBGH-E Sick Leave Bank Request Form

Miami Yoder Schools District JT60

Sick Leave Bank Request Form

I would like to request _____ days from the sick leave bank.

My Date of Hire is _____.

The sick leave bank committee will review this request and make a decision according to the sick leave bank policies.

- The sick leave bank members will consider past leave day use.
- When signing the request application you are giving consent to release attendance records to the committee for use in considering requests.
- In considering your application the committee will meet with each applicant & conduct a personal interview, examining reasons or need for the grant of days.

Additional Comments you would like us to consider? _____

(Please use back of form if needed)

Member Signature Date

The sick leave bank committee has (approved/denied) your request for _____ days from the sick leave bank.

Committee Member Signature _____

Date _____

Number of Sick Leave Bank Days given to employee: _____

ADOPTED: January 16, 2008

REVISED: May 19, 2008

REVISED: April 13, 2017