



Request to Receive Donated Vacation Leave For Military Leave

TO BE COMPLETED BY EMPLOYEE OR AUTHORIZED REPRESENTATIVE

Employee Name (Please Print)

Personnel Number (PERNR)

Position Title

Bureau & Department

\$ _____ per

\$ _____ per

Rate of pay for military active service for anticipated duration of military leave, including any differential or special pay. **Attach confirming documentation.**

Rate of Pay at the City

FROM: _____

TO: _____

Anticipated start date of Military Leave*

Expected release date from active duty*

**If there is a change in start date or release date, notify the Bureau as soon as possible*

I request to receive donated vacation leave while on military leave for active duty. I understand that I must be a permanent employee, eligible to receive vacation leave in order to participate in the Vacation Donation Program.

I understand that the donated vacation leave is to be used to bridge the difference between the amount of pay I receive while on military leave and my base rate of pay in my position with the City. I cannot receive more compensation under this program than I would have earned if I had not been on military leave.

I understand that I am only eligible to receive donated vacation time to bridge the gap in pay for up to a maximum of 6 months (1040 hours) of work. I understand that no more than one-third of that amount (approximately 8 weeks of work) may be donated at one time.

I understand that I will receive a lump sum payment, as outlined above minus the appropriate withholding deductions.

I authorize my employing bureau to post notification that I am eligible to receive donations:

in my bureau only

in all City bureaus

Do not post

Employee Signature

Date

I direct the bureau to mail manual checks to:

Address

City

State

Zip code

TO BE COMPLETED BY EMPLOYEE SUPERVISOR OR THE DESIGNATED DONATION COORDINATOR

I have reviewed the employee's request to receive donated vacation leave.

Supervisor Signature

Date

Interoffice Address

Extension

ONCE THE REQUEST IS APPROVED BY HUMAN RESOURCES, HUMAN RESOURCES WILL EMAIL THE APPROVAL LETTER AND FORMS FOR POSTING

1. If authorized by the recipient employee, post notification as instructed that the employee is eligible to receive voluntary donations of accrued vacation hours.
2. Make Military Leave – Vacation Donation Forms available to employees and inform employees where and how to return completed forms.
3. Review donation forms, compute the value of the donated hours and make copies. Send donation forms to the Bureau of Human Resources Central Time Administrator (106/404).
4. The Central Time Administrator will verify the value of the donated vacation time and send the information to the “recipient” employee’s bureau to advise how much more can be donated before the employee reaches the maximum amount for each 8 week period.
5. Bureaus request the manual check, with all necessary deductions from the Central Time Administrator. The recipient employee’s bureau will mail the check to the address identified by the recipient on the request form.
6. The maximum donated vacation leave an employee on military leave may receive is the equivalent of the difference between what the employee earns from the City and what the employee earns while on military leave for up to six months of work (1040 hours).
7. No more than one-third of that amount (approximately 8 weeks of work) may be donated at one time to an employee on leave. Donations in excess of that amount cannot be accepted at one time.

If the employee is still on military leave at the end of 8 weeks, additional vacation hours, in one-third increments, may be donated up to the 6 month maximum amount.

RETURN COMPLETED APPLICATION TO:

Bureau of Human Resources
Judy Bishop
106/404