

PROCEDURES FOR DONATING AND RECEIVING UNUSED LEAVE

The provisions of MS Code Section 37-7-307 allows any school district employee to donate a portion of his/her unused accumulated personal leave or sick leave to another employee of the same or another school district when the employee or a member of the employee's immediate family is suffering from a catastrophic injury or illness.

Catastrophic injury or illness means a life-threatening injury or illness of an employee or a member of an employee's immediate family that totally incapacitates the employee from work, as verified by a licensed physician, and forces the employee to exhaust all leave time earned by that employee, resulting in the loss of compensation from the state for the employee. Conditions that are short-term in nature, including, but not limited to, common illnesses such as influenza and the measles, and common injuries, are not catastrophic. Chronic illnesses or injuries, such as cancer or major surgery, that result in intermittent absences from work and that are long-term in nature and require long recuperation periods may be considered catastrophic. **Immediate family** is defined as spouse, parent, stepparent, sibling, child, or stepchild.

The employee donating (**donor**) the leave shall designate the employee who is to receive the leave (**recipient**) and the amount of leave being donated by completing the attached form. The completed form must be sent to the Business Manager at the Central Office for processing.

INFORMATION REGARDING THE DONOR EMPLOYEE

1. The maximum amount of unused personal leave that an employee may donate to another employee may not exceed the number of days that would leave the donor with fewer than seven (7) days of personal leave.
2. The donated days may not exceed 50% of the unused accumulated sick leave of the donor employee.
3. Unused vacation days may not be donated.
4. Leave being donated must come from unused leave accumulated from previous years, not the current year's allotted leave.
5. Leave must be donated at the time the illness or injury occurs. It may not be given retroactively.

INFORMATION REGARDING THE RECIPIENT EMPLOYEE

1. To receive leave, the employee must have used all of his/her accumulated leave from previous years and the current year's allotment.
2. The recipient must furnish the school district with a physician's statement giving the beginning date and description of the illness or injury, the prognosis for recovery, and the anticipated date the recipient employee will be able to return to work.
3. Donated days may only be used during the period covered by the physician's statement.
4. Donated leave shall not be used in lieu of disability retirement.

RETURN OF UNUSED DONATED LEAVE

If the total amount of donated leave is not used by the recipient, whole days of donated leave shall be returned to the donor employee(s) on a prorata basis. This is based on the ratio of the number of days of leave donated by each donor employee to the total number of leave days given by all donors.

IF THE DONOR AND RECIPIENT EACH MEET THE CRITERIA ABOVE, YOU MAY DONATE DAYS BY COMPLETING THE ATTACHED FORM AND SENDING IT TO THE BUSINESS MANAGER IN THE CENTRAL OFFICE.

Donor's name _____ Recipient's name _____

FORM FOR DONATION OF UNUSED LEAVE TO ANOTHER EMPLOYEE

I wish to donate _____ days of my unused accumulated leave to _____, an employee of the _____ school district.

(signature of donor employee) (ss no. of donor employee) _____
(date)

FOR CENTRAL OFFICE USE

DONOR EMPLOYEE _____ Location _____

Number of days donated _____

RECIPIENT EMPLOYEE _____ Location _____

Total days donated to recipient by all employees _____

Number of donated days actually used by recipient _____

Number of donated days not used by recipient _____

Ratio of donor's days to total days donated _____%

Number of donated days returned to donor _____
(ratio (%) of donor's days to total donated x unused days)

Date donated days returned to donor's leave card _____
