



**Confidential & Supervisory Team  
Catastrophic Illness Leave Bank  
Donation Form**

Date: \_\_\_\_\_

I, \_\_\_\_\_

(Print Name)

voluntarily donate the following unused hours from my accumulated leave balance(s) to the Palomar College Confidential & Supervisory Team Catastrophic Illness Leave Bank:

\_\_\_\_\_ Sick leave hours      \_\_\_\_\_ Vacation leave hours

I have reserved at least 160 hours of vacation and sick leave total for myself after this donation, and I am contributing fewer than 240 hours per year.

I understand that once leave is donated, it becomes the property of the bank until the Catastrophic Illness Leave task force authorizes its allocation to an applicant.

Further, I understand that my unused sick leave can be credited towards retirement calculation and, therefore, donating sick leave may reduce my final retirement allocation.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Note:** Donation is completely voluntary. CAST employees are cautioned to consider their own present and future needs when determining how many hours to donate.

**SUBMIT TO: HRHelp@palomar.edu**