



**Part-Time Counselor
or
Part-Time Librarian
Catastrophic Illness Leave Bank
Donation Form**

Date: _____

I, _____
(Print Name)

voluntarily donate _____ hours from my accumulated sick-leave balance to the Palomar College Part-Time Faculty Catastrophic Illness Leave (CIL) Bank.

Donation is completely voluntary. Faculty members are reminded to consider their own present and future needs when determining how many hours to donate.

I have complied with the donation and leave balance requirements in Article 9.16.2.2 for part-time librarians and counselors.

I understand that once leave is donated, it becomes the property of the bank until the CIL Committee authorizes its allocation to an applicant.

Further, I realize that if my hire date is prior to January 1, 1990, my unused sick leave can be credited towards retirement calculation and, therefore, donating leave may reduce my final retirement allocation.

Signature

Date

SUBMIT TO: HUMAN RESOURCE SERVICES