

Palomar Community College District

Request to use Banked Leave

It is the faculty member's responsibility to complete Part A of this form and to ensure that all required information is completed and all appropriate signatures are received by the deadline date. The completed form with all required signatures must be received in Human Resource Services **six months in advance** of banked leave (P.F.F. 9.15.4).

A. Name _____ Employee ID _____

Department _____

I request to use banked hours leave during:

Fall Semester Spring Semester _____ Year

Hours Per Week Requested _____ Full Time Equivalent _____ %

*Hours Per Week Required for replacement _____ Full Time Equivalent _____ %

*If the required number of hours have not been banked at the time this request is completed, indicate which semester(s) the remaining hours will be banked:

I request payment in lieu of leave for my banked hours at the part-time salary rate in effect at the time the hours were banked.

B. Payroll Services to verify hours banked:

_____ hours as of _____ Verified by _____

Payroll Services will return form to faculty member.

C. Faculty member to submit form for approvals:

Faculty Member Signature _____ Date _____

Approved *Rescheduled

Department Chair/Director Date

Approved *Rescheduled

Division Dean Date

Approved *Rescheduled

Assistant Superintendent/Vice President Date

*If rescheduled, recommend when leave will be taken _____

Original – Payroll

Copies – Vice President, Dean, Department, Employee, Human Resource Services

4/2021