

The School Board of Gadsden County

REGINALD C. JAMES
SUPERINTENDENT OF SCHOOLS

35 MARTIN LUTHER KING, JR. BLVD
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"Building A Brighter Future"

DONATION OF SICK LEAVE

(Please submit to the Finance Department – Leave Section)

Donor's Name _____

Last 4 digits of SS# _____ School/Dept. _____

Recipient's Name _____

Last 4 digits of SS# _____ School/Dept. _____

I, _____ (Donor), donate ____ day(s) of my sick leave to the recipient named above, who is my spouse child parent sibling designated person who is also a district employee. I understand I may not draw days from a sick leave pool until I have used unpaid leave for the number of donated days.

I, _____ (Recipient), understand I must use all my sick leave before the donated days are used and that donated days have no terminal pay value. My doctor's verification is attached.

Donor's Signature

Date

Recipient's Signature

Date

NOTE: Any unused donated sick leave will be dissolved upon termination of recipient. Donated sick leave has no terminal pay value.

FOR OFFICIAL USE

APPROVED

DENIED

By: _____
Director of Personnel/Designee Date

APPROVED

DENIED

By: _____
Assistant Superintendent for
Business and Finance/Designee Date

New 05/14

AUDREY D. LEWIS
DISTRICT NO. 1
HAVANA, FL 32333

JUDGE B. HELMS, JR.
DISTRICT NO. 2
QUINCY, FL 32351

ISAAC SIMMONS, JR.
DISTRICT NO. 3
CHATTAHOOCHEE, FL 32324
GREENSBORO, FL 32330

CHARLIE D. FROST
DISTRICT NO. 4
GRETNA, FL 32332
QUINCY, FL 32352

ROGER P. MILTON
DISTRICT NO. 5
QUINCY, FL 32353