

To:All StaffFrom:Katy Miller, Central OfficeRe:Sick Leave Bank EnrollmentDate:July 1, 2021

The Sheridan School District maintains an optional Sick Leave Bank and a Family Sick Leave Bank for employees. These banks exist for the purpose of providing additional days to employees who have exhausted their sick leave and are faced with a long-term personal illness or disability (this excludes maternity leave and elective surgery). Membership requires the donation of one sick leave day per year, per bank.

Please use this form to express your intentions in terms of the Sick Leave Bank and Family Sick Leave Bank. Note that there are two separate sections on which to make your intent known.

Please return this form to the Human Resources Department at Central Office no later than	۱
August 27, 2021.	

~ COMPLETE BOTH SECTIONS BELOW ~

EMPLOYEE SICK LEAVE BANK Please register me as a 2021-22 member of the Employee Sick Leave Bank.			
Printed Name	Signature	Date	
F	AMILY SICK LEAVE BANK		
Please register me as a 2021-22 1	nember of the Family Sick Leave Bank	ς.	
I do not wish to join the Family S	ick Leave Bank.		
Printed Name	Signature	Date	

Please check your employment classification:

____ Classified