

PINCKNEY EDUCATIONAL ASSOCIATION SHORT TERM SICK LEAVE BANK REQUEST TO BORROW SICK DAYS

Employee Name:	
Employee Number:	
any Teacher may borrow up to t illness certified by a doctor and v	of the Pinckney Education Association Master Coten (10) days of sick leave from future allocations which occurs within a limited and continuous perion sick bank. All borrowed days must be repaid as continuous perions.
Number of days being requested:	(Maximum Allowed 10 days)
Dates being used for:	
Employee Signature	Date
Human Resources Authorization:	
Number of days approved to be borrowed	d:
Human Resources	Date
Physician's statement on file: Y / N	I
Date sick bank borrow processed:	
Date sick bank paid back:	