The purpose of the catastrophic leave program is to permit employees to donate to a CATASTROPHIC leave bank (CLB) that will be used to support an employee when that employee, or a member of his or her immediate family, suffers from a catastrophic illness or injury, and the employee has exhausted all sick leave and other paid leave options. The CLB, while supporting your colleagues, also acts like an insurance policy for you, in case of unforeseen events.

*Donated Sick leave days are irrevocably given to the Catastrophic Leave Bank and cannot be rescinded for any reason whatsoever.* A donation to the Catastrophic Leave Bank shall be a general donation and shall not be donated to a specific employee for his or her exclusive use.

Only donors will be permitted to withdraw from the CLB. Unit members who elect not to join the Catastrophic Leave Bank upon first becoming eligible must wait until the next open enrollment period and are not eligible to withdraw from the Bank until they are enrolled.

Donations will be accepted during a thirty (30) day period beginning October 2 of the 2019-2020 school year. The donation period will not occur in any year in which the Bank contains ninety (90) or more days. For employees who did not donate during the initial enrollment period, the Bank will reopen every three (3) years. Existing participants will not be asked to donate unless the Bank has fallen below ninety (90) days.

Participating unit members shall make a donation each time a donation period is opened until such time that a unit member notifies the Human Resources Office in writing of his or her desire to cancel participation. The unit member shall not be eligible to draw from the bank as of the effective date of the cancellation.

I, ________________________________________ a [ ] Certificated [ ] Classified [ ] Non-Rep Employee, do hereby donate one (1) day of my accumulated Sick Leave to the Catastrophic Leave Bank. I understand that this contribution is irrevocable and waive my right to appeal this decision to any court, administrative agency or arbitrator.

| Donor Employee Signature | Date | Work Site |

FOR DISTRICT USE ONLY

6/4/13 HR