

WILLAMETTE UNIVERSITY

Shared Leave Donation Form

Date _____

Name _____

Department _____ Work Phone _____

Please transfer my leave to _____ in the amount(s) indicated below, to be used as shared leave.

Sick Leave _____ hours Total Leave to be donated:

Vacation _____ hours _____ hours

*Note: IRS has determined that such a benefit transfer does not create a taxable transfer for either the donor or the recipient. However, because the recipient receives pay, which would not otherwise have been earned, the additional pay to the recipient will be taxable.

I voluntarily donate paid leave, in the amount(s) specified, to the designated individual as shown above. I understand the rules listed on the back of this form. I understand that these donated leave hours will be deducted from my current leave balance(s) and that any Shared Leave not used by the receiving employee will be restored to me on a pro rata basis.

I do _____ or do not _____ consent to the release of my name, if requested by the recipient.

Signature of Donating Employee

Date

HUMAN RESOURCES/PAYROLL USE ONLY:

Date received: _____

Leave Balances:

Sick Leave _____ hours Total Leave donated:

Vacation _____ hours _____ hours

Donation approved _____ or not approved _____

Signature

Date

WILLAMETTE UNIVERSITY
SHARED LEAVE DONATIONS

Donor Eligibility Criteria

1. Must be in a position that accrues vacation and/or sick leave.
2. Have a sick leave balance of at least 160 hours after donating accrued sick leave, and a vacation leave balance of at least 80 hours after donating accrued vacation.
3. Donations can only be made in one-hour increments.
4. One hour of donated leave must be regarded as one hour of shared leave for the recipient, without regard to the rate of pay of the donor or the recipient.
5. Leave may not be donated prior to accrual.
6. All donated leave must be given voluntarily. No employee may be coerced, threatened, intimidated, or financially induced into donating leave.
7. The identity of all donors will be kept confidential unless permission is received from the donor to release his/her name to the recipient.
8. All donations must be authorized in writing by the employee, using the shared leave donation form available in the Human Resources office.
9. Maximum donation from any single donor to a recipient will be a total of 40 hours of vacation and/or sick leave.