

**MOUNTAIN EMPIRE UNIFIED SCHOOL DISTRICT AND CSEA  
DONATION OF CATASTROPHIC LEAVE FORM  
(Article 12 LEAVES of the Negotiated Agreement)**

CSEA Bargaining Unit Members, upon written notice to the District, during the annual enrollment period, may donate accrued sick leave credits and become a member of the "Catastrophic Leave Bank" for use by any classified leave bank member who has suffered a "catastrophic illness or injury" issue as defined in Article 12 and who has exhausted all other fully paid leave. Employees may donate eligible leave credits at a minimum of one day per year, during open enrollment. All transfers of eligible leave credits shall be irrevocable.

A "catastrophic illness or injury" means a non-occupational, physical illness or injury that is expected incapacitate the employee for an extended period of time, and taking extended time off work creates financial hardship for employee because he or she has exhausted all of his or her fully paid sick leave. The District may require verification of any claimed catastrophic illness or injury. The Association will coordinate the program in such a manner that confidentiality between participants will be maintained upon request, and feelings of obligation minimized. The Association agrees to indemnify and hold harmless the District from any loss or damages resulting from the program.

**AUTHORIZATION**

I, \_\_\_\_\_, a classified employee of the Mountain Empire Unified School District, hereby donates from my accumulated sick leave balance the sum of \_\_\_\_\_ day(s) to the "Catastrophic Leave Bank".

This authorization directs the Mountain Empire Unified School District to transfer the above time from my accumulated balance and affirms that I have read the procedures that appear at the top of this form and Article 12 within the negotiated agreement.

\_\_\_\_\_  
Employee's Name (Print)

\_\_\_\_\_  
Employee's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Payroll/Personnel

\_\_\_\_\_  
Date