

FACULTY SICK LEAVE POOL REQUEST FORM

When a faculty member's sick absence extends beyond the number of days in their sick leave account they may request to be granted up to twenty (20) sick days from the Faculty Sick Day Pool, if hours are available, and with the approval of their AD, the Dean and the Director of Human Resources.

In order to be eligible to request time from the pool a faculty member must have a medical emergency as defined under the IRS Revenue Ruling 90-29, "a medical condition of the employee or a family member that will require the prolonged absence of the employee from duty and will result in a substantial loss of income to the employee because the employee will have exhausted all paid leave available apart from the leave-sharing plan."

I am requesting _____ days be granted from the faculty sick leave pool.

Faculty Name: _____
(print)

Faculty Signature: _____ Date: _____

AD approval: _____ Date: _____

Dean approval: _____ Date: _____

Human Resources approval: _____ Date: _____