

Series 3000 - Personnel

Section 3100 - General Provisions

Policy 3108 - Personal Leave Donation Program

3108.1 ESTABLISHMENT

The Harrison County Board of Education hereby establishes a Personal Leave Donation Program for professional and service personnel pursuant to §18A-4-10f of the West Virginia Code. The intent of the Personal Leave Donation Program is to allow donor employees to transfer accrued personal leave to the personal leave account of another employee.

- 3108.1.1 A donor employee may transfer an unlimited number of accrued personal leave days to a spouse who is also an employee;
- 3108.1.2 A donor employee may transfer up to 5 days of accumulated personal leave days per year to a recipient who is not the spouse of the donor employee;
- 3108.1.3 All decisions to transfer accrued personal leave must be voluntary;
- 3108.1.4 A donor employee must designate the recipient employee;
- 3108.1.5 The recipient employee must be currently experiencing a “catastrophic medical emergency” [medical condition that incapacitates an employee or a member of the employee’s immediate family (as defined in HCBOE Policy 3106) for whom the employee will provide care, which medical condition is likely to require the prolonged absence of the employee from duty, and which will result in a substantial loss of income to the employee because the employee has exhausted all accrued personal leave, including leave awarded by a leave bank, or has exhausted all accrued personal and annual leave, including leave awarded by a leave bank, or who has exhausted all accrued personal leave and who is ineligible for an award of additional leave from a leave bank]. The superintendent, or the superintendent’s designee, shall be the sole judge upon the question of whether an employee is experiencing “catastrophic medical emergency”;
- 3108.1.6 The recipient employee must require additional personal leave as a result of a catastrophic medical emergency;

3108.1 PERSONAL LEAVE DONATION PROGRAM

- 3108.1.7 Donated leave may not be used to qualify for or add to service for any retirement system administered by the state or to extend health insurance coverage provided by PEIA;
- 3108.1.8 Donated leave shall be deducted from a donor employee's accrued personal leave, but shall not be deducted from personal leave available for use without cause if sufficient general personal leave days are available for donation;
- 3108.1.9 Donated leave transferred to a recipient employee shall be credited on a day for day basis without regard to the hourly wage value of the leave;
- 3108.1.10 Donated leave transferred to a recipient employee that is unused following the end of a catastrophic medical emergency (the end of a catastrophic medical emergency may be occasioned by the death of a recipient employee) shall be returned to the donor employee. The superintendent, or the superintendent's designee, shall be the sole judge upon the question of whether a catastrophic medical emergency has ended. In the event the donor employee is no longer employed upon a determination that a catastrophic medical emergency has ended, any unused donated leave shall be deducted from the recipient employee's accumulated personal leave; and if possible, such leave shall be returned to the (former) donor employee's account, or if not possible such leave shall be credited to the Personal Leave Bank;
- 3108.1.11 Donated leave shall be credited to the account of the recipient in the order in which the donation was received in the Finance Office, and expended by the recipient in that same order. (Days shall be used in the order they were received from the donors). Any donated days unused at the conclusion of the employee's catastrophic medical emergency shall be returned to the personal leave account of the donor;
- 3108.1.12 An employee may not be coerced or compelled to contribute accumulated personal leave under the terms of this program;
- 3108.1.13 A recipient employee is not eligible to receive donations of personal leave from another donor employee until the exhaustion of all previously donated personal leave; and

3108.1.14 A recipient employee who is receiving payments from the West Virginia Worker's Compensation Fund shall not be permitted to receive donations of personal leave from another donor.

3108.2 PERSONAL LEAVE DONATION PROGRAM

3108.2.1 All requests to donate leave under this program must be submitted by completion of a form provided for this purpose.

Approved by the Harrison County Board of Education

Effective Date: November 6, 2007

Revised Date: April 9, 2009

HARRISON COUNTY SCHOOLS
PERSONAL LEAVE DONATION PROGRAM
EMPLOYEE CONTRIBUTION FORM

I, the undersigned employee of the Harrison County Board of Education, have received, read and understand the information in the Personal Leave Donation Program.

Recipient Employee: _____

Position _____ Work Location _____

Is the Recipient Employee Your Spouse? _____ Yes _____ No

Number of Days _____ (No more than 5 days per year may be donated to recipient employee who is not a spouse)

A letter from a physician licensed to practice in the State of West Virginia must accompany this request (or already be on file in the Personnel Department). The letter must provide sufficient information to make a determination as to whether an employee is incapacitated with the meaning of "catastrophic medical emergency" [medical condition that incapacitates an employee or a member of the employee's immediate family for whom the employee will provide care, which medical condition is likely to require the prolonged absence of the employee from duty].

Recipient Employee Date

I wish to make a contribution from my accrued personal leave of _____ days (not to exceed 5 days per year) to:

Recipient name _____ Work Location _____

Signature of Donor _____

FINANCE DEPARTMENT
HARRISON COUNTY SCHOOLS
P.O. BOX 1370
408 E. B. SAUNDERS WAY
CLARKSBURG, WV 26302-1370

Office Use

Donor employee total accumulated days of personal leave as of date of request _____

Donor employee total accumulated days of personal leave that may be used without cause _____

Recipient employee accumulated days of personal leave (if any) _____

Is recipient employee a member of leave bank? _____ If so, has the employee made application for an award of leave bank days? _____

Number of days transferred to recipient employee _____

_____ APPROVED

_____ NOT APPROVED

Signature of Superintendent/Designee _____