



## **REQUEST FOR DAYS FROM THE SICK LEAVE BANK PROCEDURE (BEN-P027)**

Clarksville-Montgomery County School System

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### **1.0 SCOPE:**

- 1.1 This procedure outlines the process of requesting days from the Sick Leave Bank of Clarksville-Montgomery County School System.

### **2.0 RESPONSIBILITY:**

- 2.1 Benefits Associate

### **3.0 APPROVAL AUTHORITY:**

- 3.1 Chief Human Resources Officer

The online version of this procedure is official. Therefore, all printed versions of this document are unofficial copies.

### **4.0 DEFINITIONS:**

- 4.1 Sick Leave Bank: This Bank provides sick leave to contributors who have suffered from a personal (or that of a dependent child living with employee) illness, injury, disability or quarantine and whose accrued leave is exhausted.
- 4.2 CMCEA: Clarksville-Montgomery County Education Association
- 4.3 Member: An employee, who has completed an enrollment form, has donated two sick leave days (ref. [BEN-P026](#)) and has been a member of the Sick Leave Bank for thirty (30) calendar days.
- 4.4 Committee of Trustees: The committee is composed of five (5) members: two (2) members appointed by the Board of Education, two (2) members appointed by the CMCEA from its membership and the Director of Schools/designee, who will chair the committee.
- 4.5 LOA: Leave Of Absence

### **5.0 PROCEDURE:**

- 5.1 Member submits a completed Request for Days form (ref. [BEN-F052](#)) and Sick Leave Bank Medical Certification form (ref. [BEN-F053](#)) to the Benefits Office.
- 5.2 Benefits Associate verifies employee's membership and LOA approval.
- 5.3 Benefits Associate emails appropriate payroll personnel requesting the employee's eligibility date.
- 5.4 The employee's request is presented to the Committee of Trustees.
  - 5.4.1 Requests must be made to the Trustees within thirty (30) days of the first date usage is requested, if possible.
  - 5.4.2 In the event the member is physically or mentally unable to make request a family member or agent may file the request.
- 5.5 Generally, the Committee of Trustees meets on applications within ten (10) calendar days of the date the completed application is received in the Human Resources Department.



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- 5.5.1 Leave grants are in units of not more than twenty (20) consecutive duty days for the member.
- 5.5.2 Members may submit requests for extensions. (ref. [BEN-F052](#)).
  - 5.5.2.1 A member of the Certified Bank may receive a maximum number of sixty (60) days in a fiscal year.
  - 5.5.2.2 A member of the Classified Bank may receive a maximum number of thirty (30) days in a fiscal year.
  - 5.5.2.3 A member of the Certified Bank may receive a maximum of ninety (90) days for any one illness or injury.
  - 5.5.2.4 A member of the Classified Bank may receive a maximum of sixty (60) days for any one illness or injury.
- 5.5.3 Member drawing on the Sick Leave Bank may be required to provide additional medical documentation.
- 5.6 Benefits Associate notifies member of Committee's decision by memorandum (BEN-F054).
  - 5.6.1 If application is approved, Benefits Associate notifies the Payroll Department and deducts days from the bank balance totals.
  - 5.6.2 There is no appeal process if application is denied.

### **6.0 ASSOCIATED DOCUMENTS:**

- 6.1 TCA 49-5-801 through 810
- 6.2 Sick Leave Bank Enrollment Procedure ([BEN-P026](#))
- 6.3 Request for Days ([BEN-F052](#))
- 6.4 Medical Certification ([BEN-F053](#))
- 6.5 Sick Leave Bank Guidelines, [Exhibit B](#)
- 6.6 Approval Memorandum (BEN-F054)
- 6.7 Membership Roll

### **7.0 RECORD RETENTION TABLE:**

<u>Identification</u>	<u>Storage</u>	<u>Retention</u>	<u>Disposition</u>	<u>Protection</u>
Request for Days Form, Medical Certification, Memorandum	HR Office	Indefinitely	Permanent	Secured Building



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Membership Roll	HR Office, Computer, HR Vault	Indefinitely	Permanent	Secured Building
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### **8.0 REVISION HISTORY:**

<b><u>Date:</u></b>	<b><u>Rev.</u></b>	<b><u>Description of Revision:</u></b>
6/24/04		Initial Release
11/10/04	A	Add by memorandum in 5.5, add copy of memorandum in 5.5.1, add 5.4.3.1 and 6.7 & 6.8
7/17/07	B	Remove HUM-F027 throughout, replace WC reference with OJI
5/29/12	C	Changed Procedure number from HUM-P012 to BEN-P027. Other highlighted changes on attachment.
3/26/15	D	Add Certified Staff to 5.5.2.1 and 5.5.2.3, add new 5.5.2.2 and 5.5.2.4, redo flowchart
6/8/16	E	Changed responsibility from HR Associate to Benefits Associate. 5.6.1, removed sends memorandum, added notifies the Payroll Dept.
9/15/23	F	Updated the term "accrued" for sick, personal, and annual leave. Added the provision that this benefit is also allowable for an employee whose dependent child living with them has suffered from an injury, illness, disability, or quarantine.

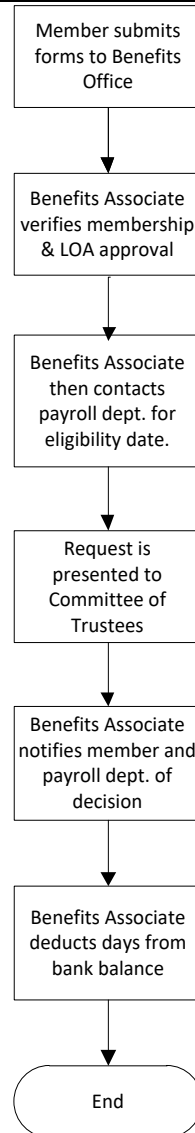
### **9.0 FLOWCHART:**

9.1 A flowchart detailing this process can be found below.

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**\*\*\* End of Procedure \*\*\***