



Oak Ridge Schools
Human Resources Office
Telephone: (865) 425-9008
Fax: (865) 425-9023

MEMORANDUM

To: Certified Staff

From: Matthew Bradburn, Executive Director of Human Resources

Subject: Enrollment in the Certified Sick Leave Bank

Date: March 20, 2020

If you are interested in participating in the Sick Leave Bank, please complete the attached "Enrollment Request Form" and return it to the Human Resources Department, Attention: Rebecca Medovich, by October 31st. There is a 30-day waiting period before any requests for use of sick leave days from the Sick Leave Bank can be submitted to the committee of trustees. All required Sick Leave Bank forms days are available on the school website under Human Resources > Resources > More Employee Documents and Forms as well as in the Human Resources Office with Rebecca Medovich.

<p>Please Note: If you are already a member, you do not need to reapply. Once enrolled, you remain a member until you request membership cancellation.</p>
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If you have any questions, please contact Rebecca Medovich at 425-9020.

Thank you for your interest in and attention to this matter.

OAK RIDGE SCHOOLS
CERTIFIED SICK LEAVE BANK
ENROLLMENT REQUEST

DO NOT SUBMIT THIS FORM IF CURRENTLY A MEMBER

Please type or use ball point pen.

The enrollment period is from August 1st through October 31st. There is a thirty-day waiting period from the date of enrollment until days can be granted from the Sick Leave Bank.

Employee Name: _____
Last Name First Name Initial

Last 4 digits of Your Social Security Number: _____

School or Department: _____

I hereby request to be enrolled in the Sick Leave Bank and authorize the transfer of three days of my unused sick leave to the Bank. I also understand that the sick leave days transferred to the bank are non-refundable and that I am subject to future assessments as determined by the Bank Trustees.

Signature Date

Please Return To: Rebecca Medovich, Human Resources Department

Revised 3.20.2020