

ARIZONA WESTERN COLLEGE

LEAVE DONATION

The purpose of Leave Donation is to provide eligible employees with additional paid leave due to catastrophic illness or injury. For more information, please refer to Procedure 435.12.

Vacation/personal leave hours transferred from:

Contributor's Printed Name

AWC ID Number

Number of hours to be transferred: _____

To be credited to the Catastrophic Leave Pool.

In accordance with the policy and procedures for leave donation, the undersigned requests that a transfer of vacation/personal leave hours from the Contributor to the Catastrophic Leave Pool take place. The payment of donated hours is charged to the department budget account for the recipient.

Contributor's Signature and Date

Human Resource's Signature and Date

