

**LEVELLAND INDEPENDENT SCHOOL  
DISTRICT**

**Sick Leave Bank Policy**

**2018-2019**

**LEVELLAND INDEPENDENT SCHOOL DISTRICT**  
**704 11<sup>th</sup> St.**  
**Levelland, TX 79336**

**SICK LEAVE BANK MEMBERSHIP APPLICATION**

**2018-2019**

A response is necessary only if an employee wishes to join.

I have read the Levelland Independent School District Sick Leave Bank Guidelines and desire to participate by donating to the Bank one (1) of my accumulated, or to be earned this school year, **local** sick leave days.

I understand that this one (1) day, once donated to the Bank in order to qualify my membership into the Bank, will be subtracted from my accumulated, or to be accumulated this year, local sick leave days available. All donations to the Bank become the property of the Levelland ISD Sick Leave Bank and cannot be returned, even upon cancellation of my membership with the Bank.

My authorization to donate one (1) local sick leave day to the Levelland ISD Sick Leave Bank and deduct one (1) day from my accumulated sick leave is verified by my signature and the information below.

Employee Name: \_\_\_\_\_  
(Please print full name)

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Position/Assignment: \_\_\_\_\_ Campus: \_\_\_\_\_

Date Employed by Levelland ISD: \_\_\_\_\_

Number of years employed by Levelland ISD: \_\_\_\_\_

Employee Signature: \_\_\_\_\_

Date of Application: \_\_\_\_\_

***Special Note: Applications must be received in the office of the Director of Personnel and Administrative Services on or before September 7, 2018.***

**LEVELLAND INDEPENDENT SCHOOL DISTRICT  
EMPLOYEE SICK LEAVE BANK**

(Revised December 15, 2010)

**FREQUENTLY ASKED QUESTIONS REGARDING THE SICK LEAVE BANK**

**1. WHAT IS THE EMPLOYEE SICK LEAVE BANK?**

It is a bank or pool of sick leave days established for Levelland ISD employees who contribute one accumulated local sick leave day to be used by any member of the bank in the event of an unexpected critical illness, surgery, or a temporary disability due to an injury which extends at least five days beyond their own accumulated sick leave, personal leave, vacation days and sub-dock days.

**2. WHO IS ELIGIBLE?**

All full-time employees who are employed by Levelland ISD and have joined the sick leave bank on or before the second Monday in September are eligible. **Conditions known to exist by the employee on or before the date of joining the Sick Leave Bank will not be covered until one year from the date of initial enrollment.**

**3. HOW MANY SICK LEAVE DAYS MUST I CONTRIBUTE TO JOIN THE BANK?**

For initial membership, one (1) day of local sick leave is contributed. **To maintain membership an employee's contribution will be one (1) day of local sick leave per year.** The annual rate of contribution for future years shall be determined and announced prior to the second Monday of September each year based on the District's needs..

**4. IS MEMBERSHIP REQUIRED?**

No. It is entirely voluntary.

**5. CAN I CANCEL MY MEMBERSHIP IN THE BANK?**

Yes, anytime, but it must be in writing and any days contributed will remain in the bank.

**6. WHAT IS A QUALIFYING "UNEXPECTED CRITICAL ILLNESS" AND WHO DECIDES?**

This is a bank member's own personal illness or **immediate family (spouse; son or daughter, including a biological, adopted, foster child, or legal ward; parent or legal guardian)**, verified by a physician and approved by a twelve (12) member Governing Committee made up of teachers, administrators, and auxiliary employees. **Normal pregnancy and delivery does not qualify.**

**7. HOW DO I JOIN?**

If you are interested in joining the bank, please complete the 2018-2019 membership application form and return it to your campus principal or department supervisor on or before September 7, 2018. All application forms must be in the office of the Director of Personnel and Administrative Services no later than September 7, 2018. Copies of the complete Sick Leave Bank Guidelines are available in the school campus office, department supervisor's office, or the Assistant Superintendent or on the District web-site at [www.levellandisd.net](http://www.levellandisd.net).

If you have additional questions, please call Rodney Caddell, Director of Personnel & Administrative Services at 894-9628.

**LEVELLAND INDEPENDENT SCHOOL DISTRICT  
EMPLOYEE SICK LEAVE BANK GUIDELINES**

***I. PURPOSE***

The purpose of the Sick Leave Bank is to provide additional sick leave days to members of the Bank in the event of an unexpected extended critical illness, surgery, or a temporary disability due to an injury. Days may be requested from the Bank only after the member has exhausted all accumulated state and local leave days, sub-dock days, vacation days, or any other type of available leave.

***II. DEFINITIONS***

**Full-Time Employee:** one who is in a position that is scheduled for 187 days per school year and working at least four (4) hours daily. *Note: Any reduction of scheduled hours below this amount will make the employee immediately ineligible for current or continuing membership.*

**Qualifying “Unexpected Critical Illness:”** bank members own personal illness or immediate family (spouse; son or daughter, including a biological, adopted, foster child, or legal ward; parent or legal guardian), verified by a physician and approved by a twelve (12) member Governing Committee made up of teachers, administrators, and auxiliary employees

*Note: Normal pregnancy and delivery does not qualify, nor does the illness of the contributor’s family that caused the employee to remain away from his/her position.*

**Sick Leave Days from the Bank:** days granted to a member who through an unexpected extended critical illness, surgery, injury or other temporary disability due to an injury is unable to perform the duties of his/her position.

***III. MEMBERSHIP***

1. *All full-time employees of the Levelland Independent School District who are eligible for sick leave benefits and employed by the district are eligible for membership.* Employees who work less than full-time shall be eligible only if they receive local sick leave benefits. Participation is voluntary, but requires contribution to the bank. Only contributors will be permitted to use the Bank for payment for qualifying extended illness during regularly scheduled duty days, and beyond all available sick leave, personal leave, vacation leave, sub-dock leave, or any other type of available leave.
2. To become a member of the Levelland ISD Sick Leave Bank, an employee must contribute one (1) day from his/her accumulated or anticipated local sick leave for the current school year. This day will be subtracted from the member’s local sick leave record and becomes the property of the Levelland ISD Sick Leave Bank.
3. Rate of contribution for the future years shall be determined by the Sick Leave Bank Governing Committee and announced prior to the acceptance of contributions for each year.

4. The contribution on the appropriate form will be authorized by the employee and membership will continue from year to year until cancelled in writing by the Bank member. Sick leave properly authorized for contribution to the Bank will not be returned if the Bank member elects to cancel. Cancellation may be effected at any time by an employee and the employee shall not be eligible to use the Bank as of the effective cancellation date.
5. ***Contributions shall be made by the second working Monday in September of the new school year.*** Eligible employees who do not elect to join the Sick Leave Bank within the enrollment period will not be permitted to join the Bank until the subsequent annual open enrollment period.
6. Only accumulated or anticipated ***local*** sick leave may be contributed to the Sick Leave Bank. No Bank member shall be required, for purposes of maintaining status in the Sick Leave Bank, to contribute more sick leave days than other members.
7. A member of the Sick Leave Bank will lose the right to use the benefits of the Bank by:
  - a. Termination of employment with Levelland ISD.
  - b. Suspension without pay during the period of suspension.
  - c. Being on approved leave of absence.
  - d. A member's voluntary cancellation of his/her membership in the Bank.
  - e. Having already been granted days for illnesses related to alcohol and/or other chemical substance dependency.
  - f. Any abuse or misuse of the rules of the Sick Leave Bank.
8. Personnel who terminate their employment with the District that results in a break in service forfeit membership in the Bank at the effective date of termination. If the employee wishes to regain membership in the Bank upon his/her return to the District, the open enrollment and eligibility rules will be in effect.

#### ***IV. SICK LEAVE BANK GOVERNING COMMITTEE***

1. The governing committee, which will approve or disapprove all requests for sick leave bank days, shall be called the Levelland Independent School District Governing Committee. Hereafter referred to as "Committee." The Committee is empowered to call an election of the membership and offer any amendments to this charter for approval by a vote of the membership.
2. The Director of Personnel and Administrative Services shall be the chairperson of the Committee. The chairperson shall not be a voting member of the governing committee except in the event of a tie vote.
3. Members of the Committee must have been employed by the school district for at least two (2) years prior to election.
4. Members of the Committee shall be elected from:
  - a. One representative from Levelland ABC Center (professional staff).

- b. One representative from Capitol Elementary (professional staff).
  - c. One representative from South Elementary (professional staff).
  - d. One representative from Levelland Intermediate (professional staff).
  - e. One representative from Middle School (professional staff).
  - f. One representative from High School (professional staff).
  - g. One representative from Carver.
  - h. One representative from Administration.
  - i. One representative from Paraprofessionals.
  - j. One representative from Support Staff (custodial/grounds, food service, maintenance, technology, or transportation).
5. The term of office will be two (2) years, with initial members drawing lots for one or two year terms in order to establish staggered terms. The term of office shall run from June 1 to May 31. A member may serve a maximum of two (2) consecutive terms.
  6. Elections will be held on the first Monday in May. Only members of the Levelland ISD Sick Leave Bank are eligible to vote.
  7. Each campus is responsible for the election of its representative.
  8. At the first meeting of the year for the newly elected governing committee, the Committee shall elect from its group a secretary.
  9. The respective campus shall fill vacancies on the Committee that arise during the school year.
  10. The Committee in a called meeting shall review all applications for Sick Leave Bank days individually. A quorum shall consist of at least six (6) members.
  11. A member may be requested to appear before the Committee to substantiate his/her case.
  12. The Committee shall determine the number of days approved up to thirty (30) and reserves the right to approve, disapprove, or modify the days requested.
  13. The Committee will review and forward to the Director of Personnel & Administrative Services its decision on all requests to draw on the Sick Leave Bank within fifteen (15) working days after such request is received.
  14. The Committee may refuse to consider an application that does not contain the required information.
  - 15. The decision of the Governing Committee is final.**
  16. The Director of Personnel & Administrative Services shall serve as the Levelland ISD Sick Leave Bank Chairperson and process all approved sick leave days for members to the Payroll Department.

## ***V. USE OF BANK***

1. Use of the Sick Leave Bank will be limited to the number of days in the Bank on the established contribution deadline of each year.
2. Conditions known to exist by the employee on or before the date of joining the Sick Leave Bank will not be covered under provision of the Sick Leave Bank until one year from the date of the employee's initial enrollment.
3. A member requesting use of the Sick Leave Bank will sign a statement attesting to the fact that the condition, which necessitated the request for days from the Bank, was unknown to the employee at the time he/she became a member of the Bank. A doctor's verification will also be required.
4. The maximum number of duty days that can be granted in any one-contract year will be thirty (30) days. The minimum request will be five (5) days. Sick Leave Bank days shall be granted only for absences from working days and will not be granted for holidays, vacation days or other such days for which the member is not paid.
5. **Members must use all available sick leave, personal leave, and accrued vacation leave (if applicable), sub-dock, or any other type of available leave before receiving days from the Bank.** A member who suffers a qualifying extended illness, which extends at least five days beyond the available leave, may apply for a grant from the Sick Leave Bank on the appropriate form.
6. If a Bank member does not use all of the days granted from the Bank, the unused Sick Leave Bank days will be returned to the Bank.
7. The Sick Leave Bank may only be used for the contributor's own personal illness **or immediate family (spouse; son or daughter, including a biological, adopted, foster child, or legal ward; parent or legal guardian).**
7. Leave from the Bank may not be used for disabilities that qualify the member for Workers' Compensation benefits.
8. A severe illness may require intermittent usage of the Bank. Each separate application for a grant from the Bank must include a new physician's statement on the appropriate Sick Leave Bank form.
9. Applicants may submit requests for extension of Bank leave grants before their prior grants expire. (Use the regular Sick Leave Bank Request Form accompanied by the signed Physician's Statement Form).
10. Normal pregnancy with normal delivery will not be covered under this Sick Leave Bank policy. Any absences associated with complicated pregnancies will only be eligible for Sick Leave Bank consideration according to the following guidelines:
  - a. Any days absent prior to the birth with a doctor's note verifying the complicating condition and the need to be off work will be eligible for consideration.

- b. Any days beyond six weeks after the birth with a doctor's note verifying the complicating condition and the need to be off work will be eligible for consideration.
  - c. Employees who had sick leave days accumulated for the pregnancy but were required to use them under guideline (a) may ask for an equal number of days from the Bank not to exceed thirty (30) days.
12. All requests to draw upon the Bank must be made upon a Sick Leave Bank Request Form and submitted to the Committee within thirty (30) calendar days of the date first eligible for a grant.
  13. All requests to draw upon the Bank must be accompanied by the Sick Leave Bank Physician's Statement confirming the cause of illness or confinement and certifying the existence of a disability to perform assigned duties. **The employee's physician must personally sign the form.** The Committee will not honor any physician's statement unless it is on the official Sick Leave Bank Physician's Statement Form.
  14. The Committee reserves the right to ask the applicant to undergo a medical review by a second opinion physician. This physician's report is to be sent directly to the office of the Assistant Superintendent to be submitted to members of the Committee for action.
  15. In case a contributor's incapacity is of such a nature that he/she cannot personally apply for a grant, his/her application may be submitted to the Committee by his/her agent or member of his/her family on his/her behalf.

#### ***VI. FORMS and RECORD KEEPING***

1. All forms (Sick Leave Bank Membership Application, Sick Leave Bank Request Form, and Physician's Statement Form) shall be available in the office of the Assistant Superintendent and shall be sent to any employee at his/her request.
2. Copies of all completed forms shall be kept on file in the District files of the Sick Leave Bank in the office of the Assistant Superintendent.
  - a. Sick Leave Bank Membership Applications shall be checked for qualifications (full-time) employee, employed by the District for a year). The employee will be notified if qualifications are not met.
  - b. The Director of Personnel and Administrative Services will notify members who request a grant from the Bank of approval or denial.
  - c. Membership cancellations will be acknowledged in writing before information is filed.
3. The Director of Personnel and Administrative Services shall maintain all records regarding operation of the Bank and will function as the Committee representative. A report on the status of the Sick leave Bank will be made at any time at the request of the Committee.

***These guidelines may be amended upon recommendation of the Governing Committee followed by approval of the Superintendent of the Levelland Independent School District.***

***Procedures for deciding any questions not covered herein:***

***Any questions concerning membership, regulations or application for sick leave days that may arise after adoption of this plan and not specifically covered herein, shall be submitted to the Committee who will make a recommendation to the Superintendent of Schools for a final decision.***





LISD employee or family member should return the Physician's Statement and the Sick Leave Bank Request Form to Mr. Rodney Caddell, Director of Personnel & Administrative Services, for processing.