

CSEA SICK LEAVE BANK Application

*This application provides a brief overview of the Sick Bank regulations: for a full description of the CSEA Sick Leave Bank see the Human Resources website.

Membership in the bank is available to all bargaining unit members of CSEA. Prospective members will apply for membership by completing this form: membership is open during the month of September of each year.

To become a member you must donate two (2) sick days from your accrued sick leave at the time of joining and one (1) day each year thereafter to retain membership. Membership may be continued each year without reapplication.

DAYS ARE NOT “REFUNDABLE.” In other words – once donated to the Bank sick days can NOT be returned to the individual.

Only members of the bank are eligible to draw benefits. Sick bank days can be used for any approved use of sick leave.

To use days from the sick bank:

You must exhaust your personal sick leave before drawing day from the Bank. If you suspect you will exhaust your sick time you should apply to the committee using the form [on the website].

Requests for sick time from the Bank may be made for any absence due to personal illness and for absences due to illness that has been designated FMLA by Human Resources.

Days granted to a member do not have to be returned to the bank; days granted and not used must be returned to the bank.

Benefits will apply only to days on which members would normally have been paid and are paid at the individual’s current rate of pay.

***From SLU/CSEA Bargaining Unit Agreement 2007-10: ARTICLE 34, SICK LEAVE: Section 11. Reconfirmed in new agreement for July 1, 2017- June 30, 2020.**

NAME

CAMPUS POSITION AND ADDRESS

PHONE

HOW LONG HAVE YOU WORKED AT ST. LAWRENCE?

HOME ADDRESS & PHONE

I HERE APPLY FOR MEMBERSHIP IN THE CSEA SICK LEAVE BANK.

MY SIGNATURE BELOW CERTIFIES MY AGREEMENT THAT:

TWO (2) DAYS NOW IN MY PERSONAL SICK DAY ACCRUAL WILL BE DEDUCTED FROM MY PERSONAL ACCOUNT AND PUT INTO THE SICK LEAVE BANK AND (1) DAY EVERY SEPTEMBER THEREAFTER TO RETAIN MEMBERSHIP. [IN YEARS WHEN THE COMMITTEE FEELS IT IS APPROPRIATE THE REQUIREMENT OF A CONTRIBUTION BY CONTINUING MEMBERS MAY BE WAIVED]. I UNDERSTAND THAT THESE SICK LEAVE DAYS ARE NON-REFUNDABLE.

I WILL ABIDE BY ALL OF THE CONDITIONS FOR MEMBERSHIP AND REGULATIONS OF THE SICK LEAVE BANK AS DETERMINED BY THE SLU/CSEA BARGAINING UNIT AGREEMENT AND THE SICK LEAVE BANK COMMITTEE.

Signature

Date

This completed form must be returned to the Human Resources Office, Vilas Hall G1,
by September 30, 2022