



Personal Leave Days Option

(Employee's Name)

(Location)

Position: _____

<p>_____ I wish to have my unused personal leave days converted to sick leave days at the end of each school year.</p>	
<p>_____ (Signature of Employee)</p>	<p>_____ (Date)</p>

<p>_____ I do not wish to convert my two "no cost" unused personal leave days to sick days each school year. I elect to receive pay for the unused days. For certified employees, the pay is \$120/day and for classified employees, the pay is \$55/day.</p>	
<p>_____ (Signature of Employee)</p>	<p>_____ (Date)</p>

****As requested, this option can be changed August 1 – September 15 of each year; no exceptions will be made.**