SUBJECT: DONATION OF EARNED VACATION TIME

<u>Purpose</u>: The purpose of this policy is to set forth administrative standards applicable to the

donation of earned vacation time to fellow employees in a time of need.

<u>Background</u>: On occasion, there may be situations where fellow employees are ill or have other pressing personal issues, but do not have adequate leave to cover their absence. To

assist fellow employees in their time of need, the City provides a procedure to allow

employees to donate earned vacation time to designated employees.

<u>Policy</u>: The following standards and parameters shall apply to the donation of earned vacation time to designated employees:

- 1. Employees may, on a strictly voluntary basis, be permitted to donate earned vacation time to a designated employee who has exhausted all of his/her accrued time off. Employees may donate leave directly to an employee, or to their specific agency pool.
- 2. Donations shall be limited to a minimum of four (4) hours and a maximum not to exceed five (5) work-days per calendar year per donating member.
- 3. An employee may receive a maximum of 240 hours of donated time; any donations above 240 hours will be returned to the donating employee. Employees are encouraged to inform Central Payroll if they would like to limit their use of donated leave to a lesser amount related to their specific need for leave. If an employee exhausts all 240 hours of donated time and all other accrued leave, they may become eligible for additional donations.
- 4. The amount of leave time available for distribution through this program will be based on the dollar value of the leave at the time it is donated.
- 5. When using donated leave time, employees will continue to be eligible for and earn all paid leave entitlements consistent with being on paid leave.
- 6. Employees may only use leave consistent with the FTE percentage of their positions.
- 7. Donations, once given, aside from circumstances outlined in paragraph #3, are not refunded to the donor, but rather remain with the receiving employee until exhausted, or after six months are returned to the receiving employee's agency membership pool. If an employee leaves employment with the City for any reason, unused donated time will be returned to the appropriate agency leave pool.
- 8. Employees will not be permitted to draw wage insurance benefits while using donated leave under this program. Individual employees will always retain the right to refuse benefits under this program without penalty.
- 9. Any employee can request use of agency pool leave by sending the request to the Human Resources Director, with a request for the amount of leave needed, not to exceed 240 hours of leave, and the purpose of use for the leave.
- 10. Probationary, hourly and seasonal employees are not eligible to participate in this program.
- 11. Leave donated under this policy will be made available to be carried over into the following year.

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- 12. Utilization of donated leave under this program is subject to approval consistent with applicable standards for the type of leave in question and must be approved in advance by the Human Resources Director.
- 13. Disputes arising from the administration of this program are not subject to formalized grievance procedures.

Note: The general policy is subject to modification through Memoranda of Understanding with recognized bargaining unit(s).

Authority:

The Human Resources Director shall maintain and interpret this policy. The City Finance Department and the Payroll Unit shall establish and disseminate any forms and procedures inherent in the Administration of this policy.

Satya V. Rhodes-Conway Mayor

> APM No. 2-30 December 2, 2019

Original APM dated 10/3/02 (Revised 1/9/04)

Donation of Vacation Time

APM 2-30 allows an employee to donate accrued vacation time to another employee. The donations are limited to a minimum of 4 hours and a maximum of 5 days. Donations are non-refundable to the donating employee. After six months, any unused time will be contributed to the recipient's agency pool.

Name:		
Agency:		
I elect to donate:		
·	Hours of vacation	
	o the donated leave balance of Department/Division.	ir
[] Which will be added to my agency pool in the		Department/Division.
Signature	Date	