VOLUNTARY SHARED PTO LEAVE POLICY

PURPOSE

The intent of this policy is to allow one employee to donate PTO leave to assist another employee when an employee or an immediate family member of the employee experiences a prolonged medical condition resulting in the employee being placed in a leave without pay status.

ELIGIBILITY

▪ Must be a regular full-time or part-time Wake Forest University employee;
▪ Employed by Wake Forest University for at least 90 consecutive work days;
▪ Scheduled (budgeted) to work 1000 hours or more per year; and
▪ Eligible to earn PTO.

Employees receiving other payments such as workers’ compensation, short-term disability, or long-term disability through Wake Forest University’s insurance programs are not eligible to receive donations.

QUALIFYING CONDITION

A prolonged medical condition is one that requires absence from work for at least 20 consecutive work days supported by medical certification listing the condition, prognosis, and the estimated time for treatment or recovery.

An exception to the 20-day requirement may be made if the employee has had previous, random, and excessive absences for the same condition as that for which shared PTO leave is currently being requested.

GENERAL GUIDELINES

1. Leave shall be donated on an employee to employee basis. Establishment of a leave “bank” is expressly prohibited.

2. The donation and receipt of leave shall be completely voluntary and kept confidential. Anyone who interferes with an employee’s right to choose whether to donate or receive leave shall be subject to disciplinary action up to and including dismissal on the basis of personal conduct.

3. Solicitation of leave is prohibited.

4. Employee leave records are confidential.

5. The employee donating leave cannot receive compensation for the leave donated.
6. The minimum amount to be donated is **four** hours and subsequent donations in one hour increments.

7. The amount donated by a non-exempt employee is not to reduce the donor’s PTO balance below two weeks. The amount donated by an exempt employee is not to reduce the donor’s balance below one-half of the annual accrual rate.

8. Sick Leave Reserve may not be donated under this PTO Leave Program.

9. Donated PTO hours are removed from the donor’s balance and added to the recipient’s balance in the next available payroll period, or may be retroactive for up to 30 days from the date the recipient’s application is approved.

10. Donations not made to a specified employee will be evenly distributed to employees on the confidential wait-list maintained by the Absence Management Coordinator.

11. Donations provided must be utilized in the PTO accrual year they were given and any unused donations will not be returned.

12. The PTO amount received in this program is limited to six weeks, prorated not to exceed budgeted hours, either continuously or, if for the **same** condition on a recurring basis. However, a continuation may be granted week by week for a lifetime maximum of 12 weeks, prorated not to exceed budgeted hours, if management would have otherwise granted leave without pay.

13. Subject to the maximum of six weeks, the number of hours of leave an employee can receive is equal to the projected recovery or treatment period, less the employee’s PTO balance as of the beginning of the recovery or treatment period. The employee must exhaust all available leave before using donated leave.

14. Participation in this program does not provide job protection (see policy on Family and Medical Leave).

**APPLICATION PROCESS**

An application to receive or donate leave must be approved by the employee’s supervisor and ultimately, the department head before it is forwarded to Human Resources. The department’s determination as to whether or not an employee’s application will be forwarded is based in part on the employee’s past compliance with University leave policies and availability of funds within the department to cover the absences. Approval for shared leave is not guaranteed.
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In order to apply for Voluntary Shared PTO Leave:

1. The employee (Recipient) should complete an “Application for Shared PTO Leave Form” (signed by supervisor and department head), the “Medical Certification Form” (also completed and signed by a health care provider) and the “Family and Medical Leave Request Form” (if applicable) and submit to the Absence Management Coordinator in Human Resources.

2. Forms will be reviewed and verified for accuracy and eligibility as identified in this policy by the Absence Management Coordinator.

3. Employee and supervisor will be notified of determination of application.

4. Approved applications will result in employee’s name added to the confidential list of recipients.

In order to donate Voluntary Shared PTO Leave:

1. The employee (Donor) should verify the need for donations by contacting the Absence Management Coordinator.

2. The employee should complete the “Medical Leave – Shared PTO Donation Form.”

3. If the employee does not have a specific recipient in mind, indicate “Unspecified Recipient” on the donation form. Donations will then be evenly distributed to employees on the confidential wait-list.

If you feel your request has been unfairly denied, please contact the Office of Compliance and Equal Opportunity.

Exceptions to this policy must be approved by the Associate Vice President for Human Resources.

Submitted by the Associate Vice President of Human Resources, approved by

__________________________________________ on _________April 8, 2009______.

Nathan O. Hatch, President