

# Procedure: 4.5.2p2. (III.U.6.a)

## Leave Donation

**Revised:** September 9, 2019; July 15, 2015; and January 13, 2005.

**Last Reviewed:** September 21, 2022; September 9, 2019; and July 15, 2015.

**Adopted:** October 2, 2001.



### I. PURPOSE:

The State of Georgia's leave donation program has been established in applicable State Personnel Board Rules. It permits eligible employees to assist other employees who are or will be absent from work for an extended period due to a personal illness or disability or the illness/disability of a qualifying family member.

Within the Technical College System of Georgia, an eligible employee may request that other eligible employees working in the same business unit (i.e., the System Office or, as applicable, a Technical College) donate accrued leave for use by the recipient as sick leave.

### II. RELATED AUTHORITY:

State Personnel Board Rule 17 – Leave Donation.  
TCSG State Board Policy 4.5.2. – Leave.  
TCSG Procedure 4.5.1p. – Family and Medical Leave Act.

### III. APPLICABILITY:

All work units and Technical Colleges that are associated with the Technical College System of Georgia.

### IV. DEFINITIONS:

- A. **Donor:** an eligible employee who has elected to donate leave to another employee
- B. **Extended Absence:** a period of absence that is more than ten (10) consecutive workdays
- C. **Immediate Family:** an employee's spouse, child, parent, grandparent, grandchild, brother, or sister, including active step and in-law relationships. Immediate family also includes any other person who resides in the employee's household and is recognized by law as a dependent employee.
- D. **Medical Hardship:** a medical condition of an employee or the employee's immediate family member that will require the employee's extended absence and will result in a substantial loss of income to the employee
- E. **Recipient:** an eligible employee authorized to solicit leave donations from other employees.

### V. ATTACHMENTS:

- 4.5.2p2.a1 – Request to Solicit Leave Donations Form
- 4.5.2p2.a2 – Solicitation for Leave Donations Notice Form

#### 4.5.2p2.a3 – Leave Donation Authorization Form

### **VI. PROCEDURES:**

#### **A. General Provisions**

1. According to the provision of this procedure, an employee experiencing a medical hardship who wishes to participate in the leave donation program must formally request and be approved for donated leave before any solicitation can commence.
2. The donation of leave by eligible System Office or Technical College employees is voluntary.
3. All donated leave shall be credited to a recipient as sick leave.
4. The recipient's current position will be held for the employee until his/her return to work after his/her family leave or regular leave of absence.
5. An eligible employee may request that other employees in the same business unit (the System Office or a Technical College) donate accrued leave for use by the recipient as sick leave. Note: The System Office includes employees working in the Quick Start Headquarters and all Quick Start Regional Offices and training centers.
6. Donated leave cannot be requested or used by employees on a contingent leave of absence without pay.
7. A recipient can use donated leave only for absences that result from medical hardship and for the specific medical hardship for which donations were solicited.
8. The identity of donors is confidential and will not be provided by the individual(s) administering this program in the System Office or a Technical College to the recipient or any other employee unless necessary to administer the donation or as required by law.
9. No more than 520 hours of donated leave may be received and credited per solicitation. Although multiple solicitations are permitted for the same recipient, no recipient will be credited with more than 1,040 hours of donated leave in any consecutive two (2) calendar year period.
10. After a recipient has returned to work, no more than forty (40) hours of previously donated leave may be retained for the recipient's use.
11. All medical information associated with a request for donated leave shall be considered confidential and may only be shared with officials outside of Human Resources on a need-to-know basis.

#### **B. Eligible Recipient**

1. All criteria referenced below must be met for an employee to be eligible to solicit and use leave a donation.
  - a. An employee must be continuously employed in a position entitled to earn and use leave for at least 12 months at the time of the request.
  - b. An employee must be in pay status or on an approved regular leave of absence without pay to solicit leave donations. An employee on contingent leave without pay or unauthorized leave without pay is not eligible to solicit donations. To use donated leave, an employee must have exhausted all accrued annual and sick leave, all available personal leave, all available forfeited leave, and Compensatory Time.
  - c. To use donated leave, an employee must first have been on approved leave without pay for forty (40) consecutive hours; however, the use of any leave accrued after placement in a leave without pay status has

commenced may be deferred until the previously referenced forty (40) hour requirement has been satisfied.

- d. An employee can only use donated leave while absent for the specific purpose for which the donations were solicited. In addition, an employee is not eligible to solicit or use leave donations if the employee was on an attendance plan or under disciplinary or other corrective action for leave abuse or misuse in the twelve (12) months preceding the request.
- e. An employee cannot solicit or use leave donations for an absence due to a job-related injury or illness for which Worker's Compensation benefits are being received or a disability incurred while committing a felony or assault.
- f. An employee cannot solicit leave donations after returning to work to cover a period of absence retroactively. In addition, due to intermittent leave, leave donations are also not appropriate to cover intermittent absences from work.
- g. A recipient may initiate a request for donated leave no earlier than forty calendar (40) days prior to transitioning into a leave without pay status.

### **C. Eligible Donor**

1. All criteria referenced below must be met for an employee to be eligible to donate leave according to the provisions of this procedure.
  - a. A donor must work in the same TCSG business unit (i.e., the System Office or a Technical College) as the recipient.
  - b. A donor must have worked continuously for a State of Georgia agency for twelve (12) calendar months in a position entitled to earn and use leave.
  - c. If donating annual leave, a donor must have a leave balance of at least sixty (60) hours after a donation has been transacted.
  - d. If donating sick leave, a donor must have a leave balance of at least sixty (60) hours after a donation has been transacted. A donor may not donate more than 120 hours in a calendar year.

### **D. Request**

1. An employee may request to solicit leave donations no more than forty (40) calendar days before moving into an authorized leave without pay status.
2. A completed Request to Solicit Leave Donations Form (Attachment: 4.5.2p2.a1.) must be submitted to the Human Resources office by the employee or the designee if the employee cannot personally submit the request. The request must describe why the request was initiated and include a medical statement from the employee's attending health care professional supporting the need for the leave of absence.
3. If the request to solicit is not approved, the reviewing System Office or Technical College Office of Human Resources will notify the employee of the decision in writing. The correspondence will include the reason the request was not approved.

### **E. Solicitation Notice**

1. The Solicitation for Leave Donations Notice (Attachment 4.5.2p2.a2.) must include the following information:
  - a. the posting date.
  - b. the deadline to receive leave donations.
  - c. the employee's (recipient's) name, work location, and position title.
  - d. the reason leave donations are requested.

- e. the name of the staff member in the System Office or Technical College Office of Human Resources responsible for receiving completed Leave Donation Authorization Forms.
2. In writing, the employee or employee's designee must agree that the solicitation notice is satisfactory prior to the notice's circulation.
3. The System Office, Technical College director, human resources, or his/her designee will circulate the solicitation notice for a minimum of ten (10) business days to encourage donations.
4. Suppose an employee does not receive the maximum amount of donated leave. In that case, the employee may request that the solicitation notice be circulated one additional time (for a minimum of ten [10] business days) during the period of absence or within a three (3) month period, whichever is less, to encourage additional donations.

#### **F. Donating Leave**

1. Leave can only be donated to another eligible employee in response to a specific solicitation.
2. A donor may donate annual, sick, or personal leave only. Donations must be made in whole, eight (8)-hour increments.
  - a. A donor can donate any amount of personal leave.
  - b. A donor can donate any amount of annual leave if the employee has an annual leave balance of at least sixty (60) hours after the donation has been accomplished.
  - c. A donor can donate up to one hundred twenty (120) hours of sick leave in a calendar year, provided the employee has a sick leave balance of at least sixty (60) hours after the donation has been accomplished.
  - d. A donation cannot be made from a forfeited leave balance.
3. No exceptions may be made to the established leave donation limits for an employee who is leaving State of Georgia employment and who wishes to donate more sick leave than permitted as described in this section or whose available sick leave balance after the donation falls below the sixty (60) hour threshold.
4. A donor must complete a Leave Donation Authorization Form (Attachment 4.5.2p2.a3.) to:
  - a. authorize the deduction of leave from his/her accrued leave balance(s);
  - b. identify the recipient; and,
  - c. specify the type and amount of leave to be donated.
5. The completed Leave Donation Authorization Form must be submitted to the System Office or Technical College office of human resources for processing. The HR Office will:
  - a. certify the donor's initial leave balance(s) before donations are made.
  - b. make appropriate adjustments to the donor's leave balance(s) after deductions are made to ensure that the donated leave is added to the recipient's sick leave balance.
  - c. report the amount of leave to be deducted from the donor's leave balance in PeopleSoft.
6. Staff in the System Office or Technical College's Office of Human Resources will time stamp and date each Leave Donation Authorization Form upon receipt to determine the order of donations received.

#### **G. Crediting Donated Leave**

1. All leave donations, up to a maximum of 520 hours, will be credited as sick leave to a recipient in the order received and on an as-needed basis.
2. Donations received after the maximum has been reached or after the posted deadline date will not be accepted or processed. In these instances, the completed Forms will be returned to each donor.
3. While using donated leave, the recipient will accrue annual and sick leave if in pay status for the required number of hours in a pay period. This newly accrued leave must be used prior to continuing to use donated leave.
4. The recipient will be advised in writing by a System Office or Technical College Office of Human Resources representative of the amount of leave donated.
5. Each leave donation will be credited in its entirety. Leave donated more than what is needed by the recipient will be returned to the donor(s); however, if a portion of a leave donation is needed, the remainder, up to forty (40) hours, will not be returned to the donor.
6. An exception occurs when a leave donation from one donor would result in over 520 hours being received. In this instance, the recipient's sick leave balance is credited up to the maximum, and the excess amount of leave is returned to the donor.
7. Once a recipient has returned to duty, no more than forty (40) hours of previously donated leave may be retained for the recipient's use.

#### **H. Multiple Solicitations**

1. Multiple solicitations will be permitted for the same recipient; however, no recipient can be credited with more than 1,040 hours of donated leave in any consecutive two (2) calendar year period.
2. Multiple solicitations are permitted for the same absence if the recipient receives and uses the maximum 520 hours of donated leave and continues to be absent from work.
3. The recipient must submit a new Request to Solicit Donated Leave (Attachment 4.5.2p2.a2.); a new Solicitation for Leave Donations Notice (Attachment 4.5.2p2.a2.) must be posted/circulated; and the recipient will not be required to be in an additional authorized leave without pay status for a period beyond the forty (40) hours required for the initial leave donation solicitation.
4. Suppose multiple leave donation requests are initiated for the same recipient based on different medical hardships. In that case, the recipient must meet all requirements for soliciting leave donations for each solicitation, including the requirement to be on authorized leave without pay for forty (40) consecutive hours before receiving donated leave.

#### **I. Prohibited Activity**

1. No employee will threaten, coerce, or attempt to threaten or coerce another employee to interfere with rights involving the donation, receipt, or the use of donated leave. Such prohibited actions will include but are not limited to promising to confer or confer a benefit such as an appointment, promotion, or salary increase, making a threat to engage in or engaging in the act of retaliation against an employee.
2. Donors are prohibited from accepting compensation or gifts from recipients in exchange for leave donations.
3. Any employee who violates these provisions will be subject to disciplinary action,

including dismissal from employment.

**VII. RECORD RETENTION:**

All employment-related documents created or collected according to this procedure shall be maintained consistent with the Georgia Archive's Retention Schedule for State Government Paper and Electronic Records. NOTE: All medical information obtained/collected with a donated leave request shall be maintained in a file separate from the employee's official personnel file with limited access.

Attachment: 4.5.2p2.a1.



**Request to Solicit Leave Donations**

Employee Name: \_\_\_\_\_ Employee ID: \_\_\_\_\_

Work Location: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Position Title: \_\_\_\_\_

I request to solicit and receive donated leave from other System Office or, as applicable, Technical College employees for my use as sick leave due to the following:

- Personal illness or disability
- Care of my:
  - Child
  - Spouse
  - Parent
  - Brother/Sister
  - Other legal dependent

I understand that to solicit leave donations, my attending health care provider MUST provide a medical statement supporting the need for my absence. As evidenced by my signature below, I authorize the release of information from the attending health care provider concerning (1) my medical care and/or treatment, or (2) the medical care and/or treatment of my family member or dependent to my employer.

\_\_\_\_\_ Date \_\_\_\_\_

Signature of Requesting Employee or Designee

Employee's Supervisor: \_\_\_\_\_ Date Request Received: \_\_\_\_\_

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\_\_\_\_\_  
Signature of Commissioner/President or Designated System Office or Technical College Official

\_\_\_\_\_  
Date

- Request Approved
- Request Denied (reason for denial required)

Note: A medical statement supporting the need for absence must be submitted with this request.

Attachment: 4.5.2p2.a2.



**Solicitation for Leave Donations Notice**

Name of Employee (Recipient): \_\_\_\_\_

Work Location: \_\_\_\_\_ Position Title: \_\_\_\_\_

Posting Date: \_\_\_\_\_ Deadline for Receiving Donations: \_\_\_\_\_

The TCSG employee listed above has been authorized to solicit accrued leave for the following reason:

- The employee's illness or disability or
- To care for the employee's:
  - Child
  - Spouse
  - Parent
  - Brother/Sister
  - Other legal dependent

The donation of accrued leave is voluntary. All leave donated by System Office or, as applicable, Technical College employees to the above-referenced employee will be credited as sick leave and may only be utilized (by the employee) for the purpose stated above.

To donate accrued leave to this employee, please complete and submit the TCSG Leave Donation Authorization Form to your leave keeper at least one (1) week before the posted deadline date.

If you have any questions regarding the leave donation process or obtaining necessary forms, please contact \_\_\_\_\_ in the System Office or, as applicable, the Technical College Office of Human Resources.

All completed Leave Donation Authorization Forms should be submitted to \_\_\_\_\_ in the (System Office/Technical College) Office of Human Resources no later than the deadline date referenced above.

**NOTE:** this notice will be posted for \_\_\_\_\_ days beginning on \_\_\_\_\_ and ending on \_\_\_\_\_.

I agree that this Solicitation for Leave Donations Notice is satisfactory and should be posted/circulated as written.

\_\_\_\_\_  
Signature of Requesting Employee or Designee

\_\_\_\_\_  
Date

**Attachment: 4.5.2p2.a3. Leave Donation Authorization Form**

**Technical College System of Georgia**

**LEAVE DONATION AUTHORIZATION FORM**

<b>SECTION I: <i>To be completed by the donor</i></b>		
Pursuant to the Leave Donation Procedure, I will donate: <i>(must be in 8-hour increments)</i>		
	<input type="checkbox"/>	hours of my annual leave <i>(requires a balance of 60 hours after donation)</i>
	<input type="checkbox"/>	hours of my leave
	<input type="checkbox"/>	hours of my sick leave <i>(requires a balance of 60 hours after donation)</i>
To be used by: (list name below)		
<b>Name of Employee (Recipient)</b>		<b>Work Location</b>
I understand that the above amount(s) of donated leave will be deducted from my accrued annual and/or personal and/or sick leave balance(s) and will not be available for my use.		
<b>Printed Name of Donor</b>	<b>Work Phone #</b>	<b>Employee ID #</b>
<b>System Office/Technical College Work Unit</b>		
<b>Signature of Donor</b>		<b>Date</b>
<b><i>This donation will not be processed without a signature</i></b>		
<b>SECTION II: <i>To be completed by the donor's Personnel Leave Keeper</i></b>		
<b>Date &amp; Time Received by Leave Keeper</b>		<b>Leave Balance(s) AFTER Donation</b>
		ANNUAL
		PERSONAL
		SICK
<b>Signature of Leave Keeper</b>		<b>Date</b>
<b>SECTION III: <i>To be completed by the recipient's Human Resource Office or other designated individual.</i></b>		
	Amount of Leave Donated	<b>Date &amp; Time received by Human Resources Office, or designated individual</b>
	Amount of Leave Returned	