

# Sam Houston State University Human Resources

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## Sick Leave Pool Donation Form

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**Sick Leave Pool Donations are unlimited and are made in 8-hour increments. Donations are strictly voluntary. The hours donated cannot be designated nor can they be restored.**

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Name: \_\_\_\_\_

Sam ID: \_\_\_\_\_

Job Title: \_\_\_\_\_

Department: \_\_\_\_\_

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I wish to contribute \_\_\_\_\_ number of hours to the Sick Leave Pool effective \_\_\_\_\_.

### Employee Acknowledgement & Signature

*I understand Sick Leave Pool Donations are strictly voluntary and that my contribution cannot be restored.*

Employee: \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Comments: \_\_\_\_\_

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