

Ensure the most current form is submitted. Refer to EMACS Forms/Procedures website.

LEAVE CONVERSION REQUEST SICK LEAVE TO VACATION LEAVE Exempt/County Fire Exempt/Special Districts Exempt

Must print in Black or Blue ink ONLY

Employee ID	Rcd No.	No. Last Name, First Name							
Company		Department	Department ID	Union Code					
	•		•	•					

TO BE COMPLETED BY EMPLOYEE

My request to convert sick leave hours to vacation leave hours may not exceed the number of hours specified below. The conversion factor to exchange my elected sick leave hours for vacation leave hours is according to the following table:

SICK LEAVE BALANCE AT TIME OF CONVERSION 201 to 599 Hours 600 to 799 Hours 800 or More Hours SICK TO VACATION LEAVE CONVERSION RATIO 3 hours Sick to 1 hour Vacation 2 hours Sick to 1 hour Vacation 2 hours Sick to 1 hour Vacation

Note: Sick leave must be exchanged in ten (10) hour increments

I elect to convert the following leave hours:

Number of sid	k leave hours	Con	Converted number of vacation leave hours				Calendar Year				
 ✓ I understand I can elect this conversion once per calendar year. ✓ I have contributed to a public sector retirement(s) for over five (5) years and have not withdrawn contribution from the system(s). 											
Employee Signature							Date				
PAYROLL SPECIALIST VERIFICATION OF ELIGIBILITY											
Current Sick Leave Balance Current Sick Leave Balance Maximum sick leave hours eligible to convert to vacation											
Payroll Specialist (Print & Sign) Telephone							Date				
Office Use Only							Daviewa d Dv/Date				
PP Begin Date	PP End Date	(-)	AVS (+)	Verified By/I	Jate	Keyed By/Date	Reviewed By/Date				

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