

REQUEST FOR CATASTROPHIC LEAVE DONATIONS
SAMPLE LETTER

To: Employees

From: Supervisor/ Manager or Designee

RE: Request for Catastrophic Leave Donation

An employee in the department has a need for Catastrophic Leave Donation;

OR

_____ in the _____ department has a need for Catastrophic Leave Donation.

(* Employee must sign consent to release name on the Catastrophic Leave Request Form.)

This situation has exhausted all of the employee's accrued vacation/PTO leave and sick leave. As defined in the UCI Catastrophic Leave Program (CLP) procedures, eligible career employees may donate accrued vacation/PTO leave hours to assist their colleagues during their need for Catastrophic Leave. Should you elect to support the employee by donating vacation/PTO leave hours, please complete the attached UCI Catastrophic Leave Program (CLP) Donation Form. Please submit the Donation Form to your supervisor, manager (or designee) for required approval.

1. Donations must be of accrued vacation/PTO only;
2. In compliance with CLP criteria, please donate vacation/PTO in whole hour increments with a minimum donation of eight (8) hours and an annual maximum donation of no more than 50% of your (the Donor's) vacation/PTO balance at the time of the transfer;
3. Once vacation/PTO leave hours are transferred to the recipient, donations are irrevocable;
4. Contributions can be made to employees at a higher or lower pay level because donations are transferred on an hour-for-hour basis (not on a dollar-for-dollar basis);
5. The Payroll office will transfer the donated time. No further action is needed on your part.
6. Catastrophic Leave donations are not tax deductible for the donor.

All donations are to be kept confidential.

Your willingness to help a colleague during a difficult period is sincerely appreciated.

ATTACHMENT: UCI Catastrophic Leave Donation Form

Questions/Forms should be directed to appropriate Human Resources Office:

For Campus: wcdm@uci.edu or call (949) 824-9152

For Medical Center: mcwcdm@uci.edu or call (714) 456-5736

For Health Sciences: hshr@uci.edu or call (949) 824-7300