



Intra-Agency Donation of Annual Leave Credits for Leave Donation Program

Instructions: Employees donating annual leave credits for a participant in the Leave Donation Program (within your own agency) must complete this form and return it to the Business Services Center, Benefits Unit either by fax, email, or mail (information above). If donating to an employee in another state agency, please use the Outside Agency Leave Donation Form (BSC B-16).

Please note that contributions of annual leave to the Leave Donation Program are voluntary. The BSC Benefits Unit will work with the Time and Attendance Unit to deduct the number of donated days from your annual leave accruals in your LATS time record. Once the donated time is deducted from your accruals, the deduction will be recorded in your audit history. A confirmation of the accruals you donated will be sent to you. Accruals that are not used will be returned to you by written notice from the BSC Benefits Unit.

If you have any questions regarding the Leave Donation Program, please contact the BSC Benefits Unit at (518) 457-4272 or by e-mail at BSCBenefitsAdmin@ogs.ny.gov.

Donor Information form with fields for First Name, Last Name, Employee ID, Negotiating Unit, Agency Name, Work Address, Work Phone, Regular Work Week, Percentage Worked, Time records are recorded in, Supervisor's Name, Name of employee you are donating to, and # Annual Days Donated.

Certification:

I am donating the annual leave days indicated above to be used as sick leave by the recipient employee. I certify that the days donated are not days I would otherwise forfeit and that this donation does not cause me to drop below a balance of ten days of annual leave as of the date of this donation.

Employee Signature

Date

BSC Benefits Use:

I have reviewed the donor's time record for eligibility and have deducted the number of annual leave day donations.

BSC Benefits Unit Representative Signature

Date