**SICK LEAVE BANK FORM**

***2012/2013***

\_\_\_\_\_\_ I would like to donate a day of sick leave to the sick leave bank.

\_\_\_\_\_\_I would **NOT** like to donate a day of sick leave to the sick leave bank.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Teacher signature Date

Please return to Lori at the district office by November 1, 2012