

**FRANKLIN COUNTY COMMUNITY SCHOOL CORPORATION**  
**VOLUNTARY SICK LEAVE BANK**

I, \_\_\_\_\_, wish to donate one (1) day to the Franklin County Community School Corporation Voluntary Sick Leave Bank. I understand this is a one (1) time donation unless the bank falls below fifteen (15) days prior to May 1<sup>st</sup> of any year. At that time, every participant will be required to donate another day to replenish the bank. (See Article VIII, Voluntary Sick Leave Bank, on page 11 of the negotiated teacher contract.)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date