

**SICK LEAVE BANK LOAN FORM**  
**CHILTON COUNTY BOARD OF EDUCATION**  
**Clanton, Alabama**

\*\*\*\*\*

Employee Name: \_\_\_\_\_ Social Security #: \_\_\_\_/\_\_\_\_/\_\_\_\_\_  
Please Print

Name of School/Work Site: \_\_\_\_\_

Position: \_\_\_\_\_

I hereby request \_\_\_\_\_ day(s) to be borrowed from the ( ) Non-certified ( ) Certified  
Sick Leave Bank for the \_\_\_\_\_ payroll period.

\_\_\_\_\_  
EMPLOYEE SIGNATURE

\_\_\_\_\_  
DATE