



PTO Leave Donation Form

Note: Donating employee must have 40 hours remaining in their PTO bank after the donation.

Employee Name: _____ Date: _____

Current PTO leave balance: _____ I am donating
_____ hours of my PTO leave to _____

of the _____ department. I understand that this leave donation is irrevocable. All donations will remain confidential.

Employee Signature Date: _____

PTO Donation may be denied at the discretion of Administration or Human Resources.

PTO can only be donated to persons out on qualified FMLA Leave who have exhausted all available PTO and EIB leave.

HR use only

Approved Yes No Date: _____

Hours donated _____ x donating Employee's hourly rate _____ = \$ _____

\$ _____ / receiving employee's hourly rate _____ = # of PTO hours _____

Original balance _____ + donated hours _____ = New balance _____

Original to Payroll, copy to EE File