FWS R5 Leave Bank Election Form

NOTICE TO EMPLOYEE: Before completing this form, please read the instructions for Sections I and II on the back. Return the completed form to your Human Resources Office. The Human Resources Office will return it to you.

I. INFORMATION ABOUT YOU	Name		Last 4 SSN
	Organization and Address	Work Phone	Date

II. TYPE OF CONTRIBUTION

Check all the boxes that apply with an "X"

A. ☐ I hereby apply for membership in the FWS Leave Bank. I authorize FWS to automatically deduct one pay period accrual of annual leave each leave year for deposit into the FWS Leave Bank until I terminate my membership.

B. ☐ In addition to any amount contributed in Box A above, I wish to donate _____ extra hours of annual leave to the FWS Leave Bank. (NOTE: A waiver may be required to do this. See instructions on the back of this form.)

C. ☐ Of the total hours show in Box B above, I wish to designate _____ hours of annual leave to the qualified recipient named below. I certify that this employee is not my immediate supervisor.

D. ☐ I hereby wish to contribute annual leave that would otherwise be forfeited at the end of the current leave year to the FWS Leave Bank. By signing the statement below, I certify that I want FWS to deposit, at the conclusion of the current leave year, all leave that I would otherwise forfeit, directly into the Agency Leave Bank. This leave may not be restored. (NOTE: To facilitate and encourage extra donations, the normal limitation for contributing use-or-lose hours is waived during the open season. This waiver is in accordance with the Leave Bank regulations under 5 CFR, Section 630.1005)

E. ☐ I hereby withdraw from FWS's Leave Bank. I understand that I may not re-enroll until the next open enrollment period or by another qualifying event.

Signature: _____

Leave and Recipient Information

Name		Last Four SSN
Organization and Address		Work Phone No.

III. Human Resources Office Certification (See statement on back of form)	Signature of Local Leave Bank Coordinator		Date
	Effective Date of this Action	II-A	II-B

GENERAL INSTRUCTIONS AND INFORMATION ABOUT THE LEAVE BANK PROGRAM

This form is used to: (1) apply for "membership" in the FWS R5 Leave Bank, (2) contribute extra hours beyond your basic membership fee to the Leave Bank, (3) designate all or a portion of the extra contribution in (2) above to a individual who is a qualified leave recipient, (4) donate use-or-lose leave to FWS R5's Leave Bank, and (5) withdraw from FWS R5's Leave Bank. Complete sections I and II, and return the form to your Human Resources Office.

You may check Box IIA and join the FWS R5 Leave Bank only during an open enrollment period for all Agency employees or during an individual enrollment period if your are a new FWS R5 employee or one returning to FWS R5 from an absence covering an entire open enrollment period.

You may check Boxes IIB and/or IIC and submit this form to the Human Resources Office at any time during the year, including an open enrollment period.

All contributions of leave are deposited in the Bank. They are not returned to you if you leave FWS R5. Also, if the person to whom you designate leave no longer has the medical emergency, any unused leave is returned to the Bank, not to you.

There are limitations on the total amount of leave you may donate to the Agency Leave Bank in any one year. These limitations are:

(1) You may not donate more than one half of the amount of annual leave you are projected to earn in a leave year, and

(2) If you are projected to forfeit leave, you may donate no more than the number of hours you are scheduled to work and receive pay (from the date of the contribution). (EXAMPLE: If you had 80 hours "use-or-lose" leave and only 5 work days remaining in the leave year, the maximum number of hours you could donate would be 40. The other 40 hours will be forfeited.)

Under certain conditions, these two limitations may be waived. If you need to request a waiver to donate leave beyond these limitations, see your Human Resources Officer.

INSTRUCTIONS FOR SECTION I

Complete all items in this section. Please type or print legibly with a ballpoint pen.

INSTRUCTIONS FOR SECTION II

Check any boxes that apply. "Box A" is used to indicate that you want to enroll as a member of the FWS R5 Leave Bank. The membership "fee" for one year's membership in the Leave Bank is one pay period's accrual of annual leave (i.e., 4,6, or 8 hours) or an amount lower or higher as set by the Agency Leave Bank Board for a particular enrollment period. All basic membership contributions will be deposited in the central Bank. They may not be designated to a recipient.

Use "Box B" to contribute extra hours beyond your basic membership fee. You may make this type of contribution at any time during the year.

Check "Box C" if you want to designate all or a portion of the extra hours you show in "Box B" to a particular FWS R5 employee whom you know is a qualified recipient under the Leave Bank program. You may donate leave to any qualified recipient, other than your immediate supervisor.

Sign on the line provided and turn this form in to your Human Resources Office. Do not send it directly to the Agency Payroll Office.

CERTIFICATION FOR SECTION III

The Human Resources Official whose signature appears in this section certifies the following:

(1) That if the applicant has checked Box A under Section II, he or she has submitted this form to the Human Resources Office within the established time limits of either an Agency open enrollment period or an individual enrollment period.

(2) That if the applicant has checked Box B under Section II, the number of hours contributed either does not exceed the regulatory limitations, or (if it does exceed the limitations) a waiver has been obtained.

(3) That if the applicant has checked Box C under Section II, the employee designated to receive the leave is a currently qualified leave recipient under the FWS R5 Leave Bank Program.

INSTRUCTIONS FOR SECTION IV

This section is completed by the Agency Official authorized to grant any waiver that may be required in order to process this application.