

SHARED SICK LEAVE
COMMITTEE MEETING MINUTES

Date: 2/26/25

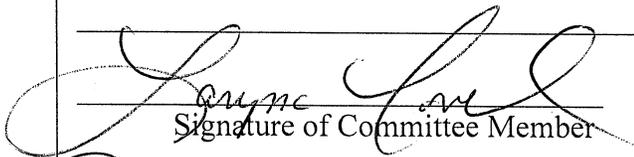
Employee requesting leave: Lorie Curry

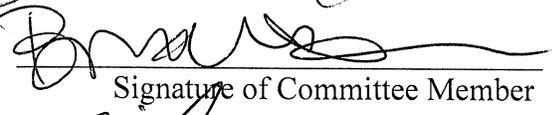
Number pf days requested: 15

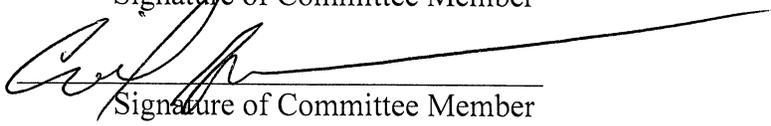
Committee approves request

Committee DOES NOT approve request

Comments:


Signature of Committee Member


Signature of Committee Member


Signature of Committee Member

Sick Leave Sharing Program

1. A sick leave sharing program provides for the donation of sick leave days to and from employees of Mid-America Technology Center District # 8. The program will permit

REQUEST FOR SICK LEAVE SHARING

Number of days requested: 15

Dates requested: 2-24-28, 3-~~3~~⁷-~~8~~, 3-10-17, 2025

Reason for the request: Broken Femur - surgery & Recovery

Attach documentation verifying the severe or extraordinary nature and expected duration of the condition and that the absence is medically essential.

Signature of the employee: Lorie Curry
Date: 2/26/25

Deliver to the Superintendent's Office