

PROCEDURE NO. 4-10-44

ISSUED: 10-01-23

REVISED: 12-27-24

REVIEWED: 12-27-24

SUBJECT: Donation of Earned Time Off

PURPOSE: To carry out the mandate of the Office of Human Resource Policy No. 4.

Any employee, choosing to do so, may submit a request to donate hours from their own accumulated earned time off to an employee who is on an approved medical leave. No solicitation for such donations will be made by anyone representing any Committee of Woodhaven or the Leadership of Woodhaven.

An employee wishing to donate hours to another should request a form from the Human Resources Office, indicate to whom they wish to donate hours and the number of hours they wish to donate. The Human Resource department will verify the amount of time off the employee has and will explain the impact this gift will have on their accumulated time off. After the Human Resources staff has explained the process, the form will be submitted to the Human Resource Director for approval or disapproval. If approved, it will be processed with the next available payroll. The deduction from the donor's balance will reflect the number of hours donated while the number of hours received by the recipient will be based on the value of the donated dollars translated into the recipient's rate of pay hours. For example, a person making \$15.00 an hour who donates 10 hours to an employee who makes \$10 hours would be translated into a donation of 15 hours for the recipient.

An employee receiving donated time can only receive a maximum of 40 hours while on the approved medical leave, unless an exception is authorized by the CEO and/or the respective C-Suite member. The receiving employee must be eligible to use ETO per Woodhaven procedure and have used all of his/her ETO or sick leave before being eligible to receive donated time from co-workers.

An employee wishing to donate ETO will only be allowed to donate a maximum of 20 hours in a 12 month period and they must maintain a balance of 80 hours, unless an exception is granted by the Human Resource Director. Any employee who is not yet eligible to use their ETO cannot donate any portion to another employee.

ETO donation will only be approved for a medical approved leave of absence for the employee or their immediate family. Immediate family in this instance includes children, spouse, parents, brothers, sisters, the employee's grandparents and grandchildren and parents of the employee's spouse, unless an exception is made by the CEO.

The CEO reserves the right to revise or discontinue this procedure at their discretion.

This procedure is intended to be purely voluntary in nature and solicitation by anyone is discouraged.

Approved by: _____

Date: _____

Human Resource Director

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ETO DONATION FORM

(CANNOT DONATE SICK LEAVE)

I would like to authorize the donation of the following amount of time from my ETO balance. I understand that this amount of time will be deducted from my bank and transferred to their bank. I understand that the donated time will not be returned to my bank.

Person I Am Donating To: _____

Reason For Donating: _____

Amount of Time Donating: _____

Amount of Time donated Year To Date: _____

Employee Signature

Date

Request Approved: _____

Request Denied: _____ :Reason Denied: _____

HR Director Signature

Date

Accounting calculation: Leave hours donated _____ times rate from donor _____ = \$ _____ value

\$ _____ value divided by donee pay rate of \$ _____ = _____ number of hours available to use.