

# Norah Merritt Executive Director of Human Resources

5 BOCES Road, Poughkeepsie, New York 12601 Phone: 845.486.4800 | Fax: 845.486.4981 E-mail: norah.merritt@dcboces.org

### **BFA SICK BANK**

### APPLICATION FOR MEMBERSHIP

#### Dear Staff Member:

According to Article V of the current contract with BOCES, you are eligible to join the BOCES Faculty Association Sick Bank. All full-time unit members shall be eligible to participate, but those not electing to contribute one day from their accumulated sick leave shall not be eligible to receive time from the sick leave bank.

At the opening of school each year, all full-time unit members electing to participate in the BFA Sick Leave Bank shall have thirty (30) days from the opening day of school to enroll. Any full-time unit member employed after the opening of school shall have thirty (30) days from the date of his/her Board of Education appointment date to enroll. All BFA Sick Leave Bank forms must be returned to the BFA designated person within this thirty (30) day time limit.

Withdrawals from the bank shall be limited to full-time unit members who are involved in catastrophic illnesses or accidents, who have exhausted their accumulated sick leave, and who are members of the sick bank.

If this form is not received within the time limits as stated above, it is understood that you do not want to participate in the BFA Sick Leave Bank. Any questions regarding the sick bank should be directed to any member of the Sick Bank Committee.



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# PLEASE COMPLETE THIS FORM AND RETURN WITHIN 30 DAYS FROM THE DATE OF YOUR BOARD APPOINTMENT TO:

Nancy Arciuolo, BFA Sick Bank Committee Member Dutchess BOCES - Career & Technical Institute (CTI) 5 BOCES Road, Poughkeepsie, NY 12601 (845) 486-8001

#### To: Dutchess BOCES Human Resources:

requesting this action so that I will be a member of the BFA Sick Leave Bank. I understand that the bank is administered by a Committee of two administrators and two BOCES Faculty Association Members.

Print Name: \_\_\_\_\_\_ Job Location: \_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_ Date: \_\_\_\_\_\_\_

New Member: \_\_\_\_\_ Declining: \_\_\_\_\_\_

Please deduct one day from my accumulated sick leave days and contribute this day to the BFA Sick Leave Bank. I am

## To: Dutchess BOCES Faculty Association:

Please deduct one day from my accumulated sick leave days and contribute this day to the BFA Sick Leave Bank. I am requesting this action so that I will be a member of the BFA Sick Leave Bank. I understand that the bank is administered by a Committee of two administrators and two BOCES Faculty Association Members.

Print Name:		Job Location:
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