



Emergency Sick Leave Bank-Continuing Membership form

New York's LEADING Union – CSEA's First Local Government Unit Established in 1947 – Representing Over 3,000 Employees of Westchester County

EMERGENCY SICK LEAVE BANK – APPLICATION FOR CONTINUING MEMBERSHIP

Dear Emergency Sick Leave Bank Member:

If you have not donated the required ten (10) days since October 2007, you must donate the outstanding days to "catch up" and continue your membership. Rejoining the Emergency Sick Leave Bank can only be done during the open enrollment period in February each year.

All applications must be submitted to your timekeeper NO LATER THAN February 29, 2024. Any submissions dated after February 29, 2024 will NOT be accepted. Please keep a copy of your completed form.

All applications must be electronically date stamped.

APPLICATION FOR CONTINUING MEMBERSHIP

Print Name: _____ Department: _____

Social Security # _____

I wish to continue my membership in the Emergency Sick Leave Bank. My timekeeper has verified that I donated _____ sick/personal leave day(s).

Signature: _____ Date: _____

I am the Timekeeper for the above listed employee. I have deducted _____ day(s) from his/her sick/personal leave balance.

Print Name: _____ Date: _____

Signature: _____

Dept.: _____ Phone #: _____

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