12345 College Blvd.
Overland Park, Kansas 66210-1299
(913) 469-8500

DATE: _____

TO: **Payroll Department**

FROM: _____

SUBJECT: Sick Leave Trade for Personal Leave

Pursuant to the college's Sick Leave/Personal Illness provisions, I request to trade _____ days of my sick leave time for _____ additional day(s) of personal leave. I understand that this additional personal leave time is non-cumulative and that its use will be in accordance with the college's Sick Leave/Personal Illness provisions.

_____

Employee Signature Date

_____

Supervisor's Signature Date

Payroll Department
Eligibility Verified _____
Date Processed _____