

Donation of Paid Time Off Policy

Adopted: December 17, 2020

Revised: March 9, 2025



Purpose

The purpose of this policy is to provide a mechanism by which employees of Wallace Stegner Academy (the "School") can voluntarily donate their paid time off ("PTO") days to other employees of the School.

Policy

1. An employee may donate his or her PTO days to another specified employee.
2. Employees may only donate time from their current PTO balance.
3. All donated PTO must be made in full-day increments.
4. Once donated PTO has been transferred to the recipient's PTO balance, the donor has no rights to that PTO for any reason. Approved donations will be immediately deducted from the donor's PTO balance and credited to the recipient's PTO balance.
5. An employee's decision to donate PTO should be an individual and personal decision and is completely voluntary.
6. All PTO donations must be approved by the Chief Executive Officer(s) ("CEO(s)"). Employees desiring to donate PTO to another employee must submit a completed Employee Donation of PTO Form (which is attached to this policy) to the CEO(s) identifying the recipient, the number of PTO days donated, the date of donation, and an acknowledgment of the employee's remaining days after the donation. Both the CEO(s) and employee will sign the Employee Donation of PTO Form. Requests that do not meet the conditions of this policy will be denied.
7. The CEO(s) will coordinate with the School's management company to assure proper documentation of these transactions. The CEO(s) will notify the donor and the recipient after the transaction has occurred.

**Wallace Stegner Academy
Employee Donation of PTO Form**

Name of Donating Employee: _____

I am requesting that _____ hours of my Paid Time Off balance be transferred to:

(Name of Receiving Employee)

I am aware of the School's rules regarding the donation of Paid Time Off and of the use of donated Paid Time Off. I have read and understand the criteria attached to this form which will be used in determining my eligibility to participate and how it will affect my Paid Time Off balance.

Signature of Donating Employee

Date

Acknowledgement:

Request Granted

Request Denied

Number of PTO days remaining for Donating Employee after donation, if applicable

Comments: _____

Signature of Chief Executive Officer

Date

School employees who are interested in donating Paid Time Off days must meet the following qualifications and understand the following guidelines:

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