

## Clinton County Board of Developmental Disabilities Annual Leave Conversion Form

This request must be submitted to the fiscal department by June 1 and/or December 1 of each calendar year. Annual Leave Conversion requests will be submitted to the Auditor upon approval of the Superintendent for payment as timely as possible.

Employee Name: \_\_\_\_\_

In accordance with Personnel Policy 14.01 and Personnel Policy 14.04, I request to convert the following hours of leave:

Vacation Leave Conversion options not to exceed 200 hours per calendar year (select one)

- \_\_\_\_\_ Vacation leave earned in previous calendar years not to be considered earnable salary  
 \_\_\_\_\_ Vacation Leave earned in previous calendar years and current calendar year with max hours applied to earnable salary

Sick Leave Conversion option up to 120 hours per calendar year

- \_\_\_\_\_ Sick Leave at 25% of my current hourly rate of pay

By signing below, I understand that I am requesting to convert leave to cash and my leave balances will be reduced by the number of hours converted. Upon conversion, I understand I must have a remaining sick leave balance of at least 240 hours and a remaining vacation leave balance of at least 40 hours. I understand the conversion payment is subject to applicable taxes and that any amount defined as earnable salary per policy is subject to OPERS withholdings.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

**To be completed by the Business Office:**

Vacation Leave

Total hours vacation leave earned in current calendar year: \_\_\_\_\_  
 Total hours vacation leave used in current calendar year: \_\_\_\_\_  
 Earnable salary hours previously converted in calendar year: \_\_\_\_\_  
 Hours earned less used and/or converted (earnable salary): \_\_\_\_\_  
 Hours to be paid that are NOT earnable salary for OPERS: \_\_\_\_\_  
 Total vacation leave hours **eligible** for conversion: \_\_\_\_\_

Sick Leave

Total hours sick leave earned in current calendar year: \_\_\_\_\_  
 Total hours sick leave used in current calendar year: \_\_\_\_\_  
 Total hours sick leave converted in current calendar year: \_\_\_\_\_  
 Total hours **eligible** as earnable salary for conversion: \_\_\_\_\_

Balances remaining after conversion:

\_\_\_\_\_ Vacation Leave (must be at least 40 hours)      \_\_\_\_\_ Sick Leave (must be at least 240 hours)

Hours eligible and approved for conversion per policy:

\_\_\_\_\_ Vacation Leave      \_\_\_\_\_ Sick Leave

Payroll Pay Code

\_\_\_\_\_ 406 Vac OPERS eligible  
 \_\_\_\_\_ 409 Vac OPERS non-eligible  
 \_\_\_\_\_ 416 Sick OPERS eligible

\_\_\_\_\_  
Superintendent Signature

\_\_\_\_\_  
Date