



RONDOUT VALLEY CENTRAL SCHOOL DISTRICT
PO Box 9, Accord, NY 12404

Dr. Joseph Morgan
 Superintendent of Schools
 845-687-2400, Ex. 4802

Lisa Pacht
 Assistant Superintendent of Schools & Operations
 845-687-2400, Ex. 4805

Nicole Kappes-Levine
 Director of Diversity, Equity, & Inclusion
 845-687-2400, Ex. 4114

Megan Braren
 Director of Pupil Personnel Services
 845-687-2400, Ex. 4863

Family Leave Day Donation *Donor* Application

Directions: Complete this application in full. Please email your completed application to Kim McEvoy, Secretary of the Sick Bank, to kmcevoy@rondout.k12.ny.us. Please note that it is at the discretion of the Sick Bank Board to approve or deny your request.

| | |
|------------------|--|
| Name | |
| Address | |
| Telephone Number | |
| RVF Unit | |

| | |
|--------------------------------|--|
| Years Employed by the District | |
|--------------------------------|--|

| | |
|---|--|
| Number of sick days you want to donate (maximum 10) | |
| RVF unit member to whom you are donating sick days | |

| | |
|-----------------------|--|
| Applicant's Signature | |
| Date of Application | |

To be completed by the Sick Bank Secretary:

| | |
|------------------------|--|
| Number of days donated | |
| Date of donation | |

| | |
|---------------|------------------|
| Approved ____ | Disapproved ____ |
|---------------|------------------|

| | |
|----------------------------------|--|
| Sick Bank Secretary's Signature: | |
| Date | |