



## REQUEST FOR SICK BUY BACK

**Administration (including Fire Chief and Assistant Fire Chief), Animal Control, City Manager's Office, Community Services, Development Services and Police Personnel:**

I have accumulated at least 288 hours of sick leave and am requesting that the City buy back 96 hours at 50% of my current hourly rate. I understand that a maximum of one buy back block is allowed every rolling 12 month period.

**Fire Department Personnel:**

I have accumulated at least 360 hours of sick leave and am requesting that the City buy back 120 hours at 50% of my current hourly rate. I understand that a maximum of one buy back block is allowed every rolling 12 month period.

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

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Printed Name**

\_\_\_\_\_  
**Department**

Buy back requests must be submitted to and approved by Human Resources. Buy back payments will be processed on the next available payroll according to the receipt and approval of the request.

Sick hours are not reimbursable upon termination.

### HR Use Only

Date Received by HR: \_\_\_\_\_ Approved By: \_\_\_\_\_

Date Paid: \_\_\_\_\_