

**THE CITY SCHOOL DISTRICT OF NEW YORK  
DIVISION OF PERSONNEL  
65 COURT STREET – BROOKLYN, NEW YORK 11201**

**APPLICATION FOR BORROWED SICK LEAVE DAYS**

I, the undersigned, have exhausted my cumulative sick leave reserve and wish to borrow \_\_\_\_\_ days of additional sick leave. In consideration for receiving the additional sick leave I agree to the following:

- a) All borrowed sick leave which is not repaid out of future earnings of sick leave shall as of the date I cease service constitute a monetary debt to the Board of Education.
- b) Such monetary debt shall be calculated at the rate of pay that I am receiving as of the date I cease service.
- c) The Board of Education in its discretion and to the degree permitted by the State Law may deduct from any sums due me as of the date I cease service an amount equal to my monetary debt.
- d) Within thirty (30) days of the date I cease service I shall pay to the Board of Education the full amount of my monetary debt or, if deductions as described in paragraph "c" have been made, the balance of my monetary debt.

\_\_\_\_\_

Date

\_\_\_\_\_

Signature of Employee

OP - 198 ar (4.82)

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