



# Snoqualmie Valley

## Public Schools

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**To:** PAYROLL OFFICER

**From:** \_\_\_\_\_  
Name (Please Print)

\_\_\_\_\_  
Location

\_\_\_\_\_  
Position

**Subject: SICK LEAVE CASH-OUT UPON RESIGNATION, RETIREMENT OR DEATH, RCW 41.35.010, RCW 41.32.010, RCW 28A.400.212, RCW 41.40.010, WAC 392.136, SCHOOL BOARD RESOLUTION #572.**

Complete this application form only if you, or your estate, elects to receive payment for sick leave due to resignation, retirement, or death. Be sure to complete all blanks. Complete forms must be submitted to the Payroll Office.

Per the above mentioned laws and school board resolution, I hereby request monetary payment for my accrued sick leave. I have already submitted my intent to resign/retire to the Personnel Office for Board approval. I understand that the formula for the cash-out is 25% of my accumulated sick leave time multiplied by my current contracted daily rate of pay. I understand that this remuneration will not be included as earnable compensation in regard to retirement. I understand I must apply for cash out of sick leave within 3 months of resignation or retirement with the Snoqualmie Valley School District (i.e., last day of employment with the District). In case of retirement, there cannot be any occurrence of any intervening covered employment.

\_\_\_\_\_ I am eligible to retire and choose to cash out my sick leave. I am applying for death benefits

\_\_\_\_\_ I am resigning, and I am a member of TRS or SERS Plan 3. I am 55 or older, and I have a minimum of 10 years of service credit in TRS or SERS Plan 3, with the Washington State Department of Retirement.

\_\_\_\_\_ I choose to receive sick leave cash out

\_\_\_\_\_ I choose to leave my sick leave balance on the books for future use, should I re-employ with a qualified public entity in Washington State.

\_\_\_\_\_ I am resigning, and I am a member of TRS, PERS, or SERS Plan 2. I am 55 or older, and I have a minimum of 15 years service credit in TRS, PERS or SERS Plan 2, with the Washington State Department of Retirement.

\_\_\_\_\_ I choose to receive sick leave cash out

\_\_\_\_\_ I choose to leave my sick leave balance on the books for future use, should I re-employ with a qualified public entity in Washington State.

\_\_\_\_\_  
Employee or Executor Signature

\_\_\_\_\_  
Date of Resignation, Retirement, Death