Office of Human Resources

LORAIN CITY SCHOOLS
Lorain Administration Center
2601 Pole Avenue, Lorain, OH 44052
440.830.4010 fax 440.282.9541

Request for Compensation for Unused Accrued Leave (LAA)

ADMINISTRATORS

DATE: _____

NAME: _____ **S.S.#:** xxx-xx-_____

SCHOOL: _____ **POSITION:** _____

I am requesting _____ unused accrued leave day(s) for compensation at the rate of $200.00 each which I have not used this school year.

_____
Signature

Article VII – Administrative Compensation C-3 states that "unused accrued leave will be bought back at the rate of Two Hundred Dollars ($200.00) per day". Therefore, request for compensation for unused accrued days must be received in the office of Human Resources by 4:30 pm of the last scheduled work day in order to receive said compensation.

Please send this form to H. R., Lorain Administration Center. Forms received by the last Friday in May will be processed for payment the second payment pay period in June.

Office use only

Verification of unused accrued days_____

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