STANWOOD-CAMANO SCHOOL DISTRICT

Time Loss Election Form

INSTRUCTIONS:

The following information is to be completed by an injured employee who has a time loss claim and is eligible for paid leave (sick, vacation or other similar leave benefits). The employee has the option to receive additional pay to supplement the time loss payments that he/she may receive, by using existing leaves. Make your selection in the payment provisions section below:

Employee Name:_____ Department: _____

Location: _____ Position: _____

Date of Injury: _____ Claim #: _____

SEND COMPLETED ORIGINAL TO:

Rita Kellerman (ext 3518) - Stanwood Elem, Twin City Elem, Transportation, Admin
Jana Shaughnessy (ext 3519) - Cedarhome Elem, Elger Bay Elem, Food Service, Stanwood Middle, Stanwood High
Kaylie Amundson (ext 3517) - Utsalady Elem, Port Susan Middle, Lincoln Hill, Saratoga, Maintenance

IF ELIGIBLE, YOU WILL BE PAID:

Industrial Insurance Benefits: Temporary Total Disability (TTD) benefits based upon date of injury wages (typically 60% to 75% of gross wages depending on marital/dependent status up to a maximum of 120% of the state's average wage).

Optional Leave Benefits: You are on leave-without-pay status with the District while off work related to a work injury. However, you may voluntarily elect to receive sick/vacation leave pay and/or other similar benefit pay in addition to your industrial insurance benefits.

☐ (**OPTION #1) -** If eligible for time loss benefits from the Puget Sound Workers Compensation Trust, I wish to receive only those time loss benefits. Do not apply any of my available paid leave.

☐ **(OPTION #2)** I wish to use my available sick leave to keep my pay in force with the District during the range of time I am receiving time loss benefits from Puget Sound Workers Compensation Trust (PSWCT) and buy back the proportionate share of sick leave used with the payment(s) I receive for time loss benefits.

- Employee receives time loss payment(s) from PSWCT
- District receives a copy of time loss payment(s) from PSWCT
- District uses the benefit payment(s) amount and time loss date range to calculate the value of sick leave buy back, excluding any days exempt from leave (paid holidays, vacation, LWOP)
- District deducts time loss payment(s) from employees' next available paycheck
- District returns the number of sick leave hours bought back with the time loss payment(s) to the employees' sick leave balance in the next calendar month

☐ **(OPTION #3)** If eligible for time loss benefits from the Puget Sound Workers Compensation Trust, I wish to receive those benefits AND use my available leave to keep my pay in force with the District. Please apply the following leave type(s) during my time off work due to my work injury:

___ Sick ___ Personal ___ Vacation

Note: Unpaid time off with the District will impact your creditable experience for the school year and may impact your future salary schedule placement, as well as seniority.

Your elections may also impact medical benefit eligibility, retirement, and Holiday pay. To discuss any possible impact, you can contact the Payroll Department.

_____ _____

Employee signature Date