



Clinton Public School District

APPLICATION TO RECEIVE DONATED LEAVE

PART I: To be completed by the Recipient Employee.

1. Employee Name:	2. Department / School:
3. Last four digits of SSN:	4. Phone Number:

PART II: To be completed by the Physician.

Instructions: The employee named in Part I has exhausted all leave and has applied to receive donations of leave as established by Sections 25-3-93, 25-3-95, and 25-3-91 of Mississippi Code of 1972. Please complete the information below for your patient.

Definition: : “Catastrophic Injury or Illness” is defined as a life-threatening injury or illness of an employee or a member of an employee's immediate family (spouse, parent, step-parent, sibling, child or step-child) which totally incapacitates the employee from work, as verified by a licensed physician, and forces the employee to exhaust all leave time earned by that employee, resulting in the loss of compensation from the state for the employee. Conditions that are short-term in nature, including, but not limited to, common illnesses such as influenza and the measles, and common injuries, are not catastrophic. Chronic illnesses or injuries, such as cancer or major surgery, which result in intermittent absences from work and which are long-term in nature and require long recuperation periods may be considered catastrophic.

1. In your opinion does the employee/family member meet the “Catastrophic Injury or Illness” definition above? ____ Yes ____ No

If no, sign and date this form. If yes, answer questions 2-6.

2. If the patient is an immediate family member of the employee, is the employee needed to care for the family member? ____ Yes ____ No

3. Date Catastrophic Injury/Illness Began:

4. Give a detailed description of the diagnosis, and if applicable, method of treatment.

5. Provide a prognosis for recovery.

6. Date the employee will be able to return to work.

Physician's Name and Address (Print):

Physician's Signature:

Date:

Clinton Public School District requests this information for the purpose of determining your eligibility for Donated Leave. Persons outside of the Department of Human Resources will not have access to this information.