Accrued Leave Election Form

Fort Worth INDEPENDENT SCHOOL DISTRICT

Under the Texas Workers' Compensation Act (the Act), if your injury or illness results in lost-time from work, you may be entitled to income benefits. In addition, the Act provides (Texas Labor Code Section 504.052 - Sick Leave Benefits):

a. The governing body of a political sub-division, by majority vote, may provide that while an employee of the political sub-division is receiving benefits under this chapter, the employee may elect to receive previously accrued sick leave benefits, whether statutory or contractual, in an amount equal to the difference between the benefits under this chapter and the weekly compensation that the employee was receiving before the injury that resulted in the claim.

b. Sick leave benefits received under subsection (a) shall be deducted proportionally from the employee's sick leave balance.

c. This section does not limit the medical benefits to be paid to the employee. A sick leave plan may not require an employee to take sick leave benefits before receiving benefits under this chapter.

Please indicate your election regarding the use of your accrued leave balances below, print your name, sign your name, and annotate the date appropriately.

I do _____ / **I do not** _____ elect to use my available (sick, vacation, personal) leave balances in order to receive benefits in an amount equal to the difference between the benefits I may receive under the Texas Workers' Compensation Act and the weekly compensation I was receiving before my injury or illness that resulted in my work-related injury claim.

Employee's Printed Name (First/Middle Initial/Last Name)

Employee ID. Number

Employee's Signature

Date

Date of Injury:

Location#