

WRIGHT ELEMENTARY SCHOOL DISTRICT
4385 PRICE AVENUE, SANTA ROSA, CA 95407
415-542-0550

TRANSFER OF SICK LEAVE

Employee: If you have worked for another California Public School in the last year, you may be eligible to transfer your sick leave balance to Wright Elementary School District. To initiate this transfer, you must legibly complete the top portion of this form and submit it to your previous employer in a timely manner.

Previous Employer Information

District Name: _____

City/County: _____

Phone/Email: _____

HR Contact: _____

Employee Information

*Name: _____

Last month/year worked: _____

Position: _____

Phone/Email: _____

I give my permission for the release of the information requested below to the Wright Elementary School District.

Employee Signature

Previous Employer: The Employee Named above* has been offered employment with Wright Elementary School District and has indicated previous employment with your school district. Pursuant to Ed Codes [45202](#) and/or [44982](#), this employee may be entitled to the transfer of sick leave from your district, and has requested that any eligible leave be transferred to Wright Elementary School District. Please provide us with the following information for our records. Thank you for your assistance.

Verification of Unused, Earned Sick Leave Hours: _____ **Termination Date:** _____

If your records indicate that sick leave has been transferred to another district, please report the following:

_____	_____	_____
District to which transferred	# of hours transferred	Date transferred

Completed by:

Name (please print)

Title

Signature

School District

Date

**Email completed form to cchavez@wrightesd.org
and cc: equinn@wrightesd.org**