

YAMHILL COUNTY
Official Policy

**Donation of Flexible Earned Time (FET)
or Vacation Leave**

Board Order # 88-293, June 1, 1988
Board Order # 01-829, November 1, 2001
Board Order # 03-820, November 14, 2003
Board Order # 16-503, December 15, 2016

1. Yamhill County employees are permitted to irrevocably donate flexible earned time (“FET”) or vacation time to another employee (“donee”) who has exhausted all leave available to them, under the following circumstances.
 - a. The donee is experiencing personal hardship due to an extended illness.
 - b. It is necessary for the donee to act as caregiver for a family member who is experiencing personal hardship due to an extended illness. For purposes of this policy, a donee’s family member means:

spouse, same sex domestic partner, parents, children, brother, sister, grandparent, grandchild, stepmother, stepfather, stepchild and the spouse’s same (i.e. spouse’s grandparent, etc.) or any other family members residing in the donee’s immediate household, or as defined by state or federal law or the applicable collective bargaining agreement.
2. FET or vacation hours donated under this policy shall be valued at the donor’s rate of pay. Donations shall be made in increments of one or more hours. The County accounting division shall be responsible for making the appropriate calculations and payment.
3. Donated leave will not be deducted from the donor’s leave bank until drawn on by the donee.
4. Donated leave can only be utilized for time loss associated with the qualifying medical event.
5. A donation form, which is available on the intranet and in the accounting division, must be completed by the donor, authorized by the department head, and submitted to the County Administrator no later than 10 days before the end of the month for which the donation is effective.

**DONATION OF FET / VACATION TIME
TO ANOTHER EMPLOYEE**

Donor Name _____ **Employee #** _____
Print

Department _____

Recipient (Donee) Name _____ **Employee #** _____
Print

Department _____

Donor hereby, and without coercion, donates _____ hours of donor's FET or vacation time to donee which may be added to donee's accrued FET or vacation time under the following circumstances: (1) The donee is experiencing personal hardship due to an extended illness, or (2) it is necessary for the donee to act as caregiver for a member of the donee's immediate family who is experiencing personal hardship due to an extended illness. A donee's immediate family is limited to the following relatives: spouse, same sex domestic partner, parents, children, brother, sister, grandparent, grandchild, stepmother, stepfather, stepchild and the spouse's same (i.e. spouse's grandparent, etc.) or any other family members residing in the donee's immediate household, or as defined by state or federal law or the applicable collective bargaining agreement.

Donor authorizes Yamhill County to reduce donor's accrued FET/vacation time by the number of hours donated above and hereby relinquishes and waives any right to or interest in the FET/vacation time donated above and agrees to release Yamhill County, its officers, agents and employees, from any claim whatsoever arising from the donation. Donor has been informed, and agrees, that donor's accrued FET/vacation time both before and after this donation is as follows:

1. Donor's accrued FET/vacation leave prior to donation: _____ hours
2. Number of hours donated above: - _____ hours
3. Donor's accrued leave remaining after donation: = _____ hours

 Donor Date

 Donor's Department Head Date

 County Administrator Date

 Donee's Department Head Date

 Human Resources Manager Date