

**HAUPPAUGE PUBLIC SCHOOLS
PERSONNEL & ADMINISTRATION**

Under the terms of the Agreement between the Hauppauge Union Free School District and the Hauppauge Teachers Association, Article XIX, Section B, I hereby apply for a Sick Bank loan as follows:

_____ School Days Requested
From: _____
To: _____

It is hereby agreed that the repayment plan will be added to Employee's annual cumulative sick leave report.

It is hereby agreed that in the event of death or permanent disability, the loan shall be forgiven.

It is further agreed that in the event Employee is no longer employed by the District, Employee shall remain liable for the full cost of the unpaid days at the current prevailing rate.

Kindly attach medical verification of disability.

Signature:

Employee

Authorized By:

Asst. Supt. Personnel & Administration

Authorized By:

President, Hauppauge Teachers Association

Date Approved: _____