

Civilian Personnel  
**VOLUNTARY LEAVE TRANSFER PROGRAM**

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**SUMMARY.** This is a change to FH Reg 690-52, 29 September 1989. Changes have been made to pages 1 and 8.

**SUGGESTED IMPROVEMENTS.** The proponent of this regulation is the Directorate of Civilian Personnel (DCP). Users are invited to send comments and suggested improvements to the Commander, III Corps and Fort Hood, ATTN: AFZF-CP-M, Fort Hood, Texas 76544-5056.

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1. New or changed material is indicated by an asterisk.
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1, 2, 7, and 8

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**Civilian Personnel  
VOLUNTARY LEAVE TRANSFER PROGRAM**

**APPLICABILITY.** *This regulation applies to all civilian employees paid from appropriated funds and serviced by CPO.*

**IMPACT ON NEW MANNING SYSTEM.** *This regulation does not contain information that affects the new manning system.*

**SUPPLEMENTATION.** *Supplementation of this regulation is prohibited, except upon approval of AFZF-CP.*

**SUGGESTED IMPROVEMENTS.** *The proponent of this regulation is the Civilian Personnel Office (CPO). Suggested improvements and comments should be addressed to Commander, Headquarters III Corps and Fort Hood, ATTN: AFZF-CP-M, Fort Hood, Texas 76544-5058.*

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**OVERVIEW**

1

**Purpose** This regulation establishes procedures and requirements and implements the voluntary leave transfer program.

1a

**Reference** CPR 5, Part 630 (Absence and Leave: Voluntary Leave Transfer Program)

1b

**Policy** No employee may directly or indirectly

- intimidate
- threaten
- coerce, or
- attempt to
  - intimidate
  - threaten, or
  - coerce
- any other employee to interfere with any rights which an employee may have regarding donating, receiving, or using annual leave under this program.

This includes

- promising to confer or conferring any benefit
  - an appointment
  - promotion, or
  - compensation
- effecting, or
- threatening to effect any reprisal
  - deprivation of
    - appointment
    - promotion, or
    - compensation.

1c

**TERMS**

2

**\*Employee** Employee means an individual who is appointed in the civil service.

Employees covered under Title 20, United States Code (such as school teachers) and employees paid from nonappropriated funds are excluded from participating in the program.

**Family Member** Family member - means the following relatives of the employee: spouse, and parents thereof; children, including adopted children, and spouses thereof; parents; brothers and sisters, and spouses thereof; and any individual related by blood or affinity whose close association with the employee is the equivalent of a family relationship.

2a

Leave Donor	Leave donor - means an employee whose voluntary written request for transfer of annual leave to the account of a leave recipient is approved by the agency.	2b
Leave Recipient	Leave recipient - means a current employee for whom the employing agency has approved an application to receive annual leave from the annual leave accounts of one or more leave donors.	2c
Leave Year	Leave year - means the period beginning with the first day of the first complete pay period in a calendar year and ending with the day immediately before the first day of the first complete pay period in the following calendar year.	2d
Medical Certificate	Medical certificate - means a written statement signed by a physician or other appropriate expert certifying to the incapacitation, examination, or treatment, or to the period of disability while the patient was receiving professional treatment.	2e
Medical Emergency	Medical emergency - means a medical condition of an employee or a family member of such employees that is likely to require an employee's absence from duty for a prolonged period of time and to result in a substantial loss of income to the employee because of the unavailability of paid leave.	2f
	NOTE: A normal uncomplicated pregnancy is not considered a medical emergency under this program.	

## RESPONSIBILITIES

		3
Leave Recipient	The potential leave recipient is responsible for making a written application for leave to their immediate supervisor using FHT 690-X22 (Leave Transfer Recipient Application) (see figure 1).	3a
Leave Donor	<p>Potential leave donors will</p> <ul style="list-style-type: none"> <li>● submit a voluntary written request <ul style="list-style-type: none"> <li>● FHT Form 690-X23 (Leave Transfer Donation Form) (see figure 2).</li> </ul> </li> <li>● specify the number of hours of their accrued annual leave to be transferred from <ul style="list-style-type: none"> <li>● their annual leave account</li> <li>● to the annual leave account of a specified leave recipient.</li> </ul> </li> </ul>	3b

LEAVE TRANSFER RECIPIENT APPLICATION

Recipient Name: Jane Doe

Activity: LEA

SSN: 100-00-0022

Office Phone: 288-0000

Grade: GS-04

Hours requested: 300

Current Annual Leave Balance: 0

Current Sick Leave Balance: -20

Medical Emergency

Beginning date: 1 August 1989

Ending date: 1 March 1990  
(Approximate if uncertain)

Brief Description: Attach Medical Certificate.

I will be undergoing vascular surgery. I have been hospitalized before for similar surgery and have used all my leave. The follow-up exams and forthcoming surgery will require approximately 300 hours.

I certify that the above statements are true and accurate and that I have exhausted or will exhaust all my earned leave Jane Doe 7-18-89  
Signature and Date

I wish to have my needs or reasons publicized yes  no

Absence from duty without paid leave because of the Medical emergency (or is expected) to be at least 80 hours (or in the case of a part-time employee or an employee with an uncommon tour of duty the average number of hours of work in the employee's biweekly scheduled tour of duty). yes  no

Leave Approved: yes  no  (state reasons below) Number of hours 300

Immediate Supervisor: Bill Jones Date: 7-19-89

Leave Transfer Recipient Approved: yes  no  (state reasons below)

Activity Director: Philip Stone Date: 7-20-89

CPO, MER Division Verification: Shirley Cunn 7-21-89  
Signature and Date

\* The application of the Leave Transfer Program is subject to the Negotiated or Agency grievance procedure as appropriate.

Privacy Act Statement: Authority: Public Laws 100-203 & 100-750. Principal Purpose: To provide information to the recipient of this program. To verify the identity of the recipient. To prevent and record errors in identifying the recipient. To ensure that the recipient's information is used for identification. Disclosure Effect: Information is voluntarily furnished with the request for information. Information requested will be handled.

Figure 1. Leave Transfer Recipient Application

LEAVE TRANSFER DONATION FORM

Donor Information

Name: Jim Boyd Activity: LEA
SSN: 001-00-2000 Office Phone: 288-0011
Grade: GS-05 Hours Donated: 40
Leave Category: (circle one) 4 6 8 hours

Is the leave transfer recipient your immediate supervisor? yes \_\_\_ no X

I affirm that this leave is given freely without any promise of benefit or of being threatened by reprisal if I fail to make this donation.

Jim Boyd 9-29-89
Signature and Date

Recipient Information
Name: Jane Doe Activity: LEA
SSN: 100-00-0022 Office Phone: 288-0000
Grade: GS-04

[Office Use Only]
Effective date of transfer
Number of hours transferred
Processed pay period ending date
Restoration
Number of hours
Pay period ending date

FHT FORM 1 APR 89 690-X23 (CPO) Replaces FHT FL 690-X7 (Jun 88) Which is Obsolete

Privacy Act Statement Authority: Public Laws 100-202 & 100-284 Principal Purposes: Regulations established by the Office of Personnel Management (OPM) for the temporary leave transfer program require that donations of leave be authorized in writing by the donor and requests for leave donations be requested in writing. Your social security number is requested to verify the identity of the donor and recipient, and avoid errors in identifying leave accounts. Information regarding your grade and annual salary is requested because of reporting requirements established by OPM for their evaluation of the program. Routine Uses: Information is used for identification. Disclosure Effect: Disclosure is voluntary; however without requested information processing requests will be hindered.

Figure 2. Leave Transfer Donation Form

Leave Recipient's Supervisor

The leave recipient's supervisor will

- monitor the status of the medical emergency of the leave recipient on a case-by-case basis.
- annotate on the back of the leave recipient time card the number of hours of leave taken in conjunction with the medical emergency.
- communicate at least once during each pay period to find out the status of the medical emergency with
  - the leave recipient, a family member, or personal representative or
  - appropriate medical personnel .
- document this communication on
  - OF Form 271 (Conversation Record) or
  - a memorandum for record.

3c

Finance and Accounting (FAO), Civilian Payroll Section

The civilian payroll section will

- maintain both leave recipient's and donor(s) leave accounts.
- for reporting purposes, provide CPO, Management Employee Relations (MER) Division with the total amount of
  - annual leave transferred to each leave recipient's annual leave account from each leave donor.
  - transferred annual leave used by each leave recipient on a quarterly basis each fiscal year.

3d

CPO, MER

CPO, MER will maintain records concerning administration of the program for the purpose of evaluating the desirability, feasibility, and cost.

3e

**PROCEDURES**

4

Eligibility

To become a leave transfer recipient, the employee must

- have been affected by a medical emergency and
- the resulting absence from duty without available paid leave has been or is expected to be
  - at least 80 hours for a full-time employee or
  - the average number of hours of work in a biweekly scheduled tour of duty for a part-time employee or an employee with an uncommon tour of duty.

4a

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**Application****The leave transfer recipient application form**

- is FIIT Form 690-X22
- is available from
  - CPO
    - Building 4220
    - 77th Street and Warehouse Avenue or
  - Directorate of Information (DOIM) Publications Warehouse
    - Building 4254
    - 79th Street and Warehouse Avenue.
- shall include as a minimum
  - name, social security number, position title, grade or pay level, and activity of the potential leave recipient.
  - the reason transferred leave is needed
    - include a brief description of
      - nature
      - severity, and
      - anticipated duration of the medical emergency affecting the employee or the employee's family member, and
    - if it is a recurring one, the approximate frequency of the medical emergency affecting the potential leave recipient.
  - medical certification from at least one physician.
    - Requests for annual leave to care for incapacitated family members also requires medical certification.
  - the date (or approximate date) the medical emergency began; if it no longer exists, the date (or approximate date) it ended.
  - statement whether employee wants to have their needs or reasons publicized.
- will be
  - treated as a request for leave
  - reviewed by the immediate supervisor, and a
  - preliminary recommendation is made for approval or disapproval.

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(continued on next page)

Application  
(Continued)

Forward application to the activity director for final approval or disapproval of the leave transfer.

**NOTE:** If the employee is not capable of making an application on their behalf, another employee of the potential leave recipient's employing agency may make written application on their behalf.

4b

Approval

FHT Form 690-X22 is the approval or disapproval document.

The prospective leave recipient is notified in writing within 10 working days from the date this application is received by the activity.

If the application is

- approved, the application is forwarded to CPO, MER Division for further processing
  - review application to make sure that it meets the requirements of block 4a.
  - forward original application to civilian payroll office for pay purposes.
  - retain a copy of application for reporting purposes.
- not approved, the reasons for disapproval must
  - be explained and made a part of the application and
  - returned to the employee.

4c

Request for  
Donors

The employee is responsible for obtaining donors; however, if he or she authorizes to have his or her needs or reasons publicized, the immediate supervisor may request donations from within the leave recipient's activity.

If a significant number of donors are not found, the activity may solicit leave donations by

- contacting other activities for donations
- requesting that the CPO, MER Division publicize his or her needs or reasons in employee and supervisor newsletters.

**NOTE:** Privacy of specific information concerning the recipient will be protected.

4d

Donations

Employees must complete FHT Form 690-X23

- which is available from CPO or the DOIM Publications Warehouse and
- then forward it to the civilian payroll section.

The total amount of leave that a donor may transfer to other employees is subject to the limitations specified in block 4f.

**NOTE:** An employee shall not donate leave to his or her immediate supervisor.

(continued on next page)

Donations  
(continued)

It is expected that most leave donations will be made to coworker by the donor's own agency; however, Office of Personnel Management (OPM) regulations permit donations to and from employees in other agencies if certain conditions are met.

4e

## Limitations

In any one leave year, a leave donor may donate no more than a total of one-half of the amount of annual leave he or she would be entitled to accrue during the leave year in which the donation is made.

- The leave donations cannot exceed the donor's current annual leave balance.

In the case of a leave donor who is projected to have annual leave that otherwise would be subject to forfeiture at the end of the leave year, the maximum amount of annual leave that may be donated during the leave year shall be the lesser of

- one-half of the amount of annual leave he or she would be entitled to accrue during the leave year in which the donation is made, or
- the number of hours remaining in the leave year (as of the date of the transfer) for which the leave donor is scheduled to work and receive pay.

\*In unusual circumstances, the limitations on the amount of annual leave an employee may donate may be waived when

- the leave donor is a family member of the leave recipient,
- the amount of annual leave donated is not sufficient to meet the needs of the leave recipient, or
- when the leave recipient's employing agency determines that waiving the limitations on the amount of annual leave an employee may donate would further the purpose of the program.

The potential leave donor will submit

- a request for a waiver
- in writing
- to CPO, MER Division.

4f

Use of Donated  
Leave

A leave recipient may use annual leave transferred to his or her annual leave account in the same manner as if he or she had accrued the leave.

Annual or sick leave accrued or accumulated before the date the application to become a leave recipient is approved must be exhausted before any transferred annual leave may be used.

Annual leave transferred under this program may be substituted retroactively for periods of leave without pay or unliquidated advanced annual or sick leave granted on or after the established beginning date of the existing medical emergency.

Transferred annual leave will not be included or paid as lump-sum annual leave payment upon separation of the recipient.

Any unused donated leave will be returned to the leave donor per block 4j below.

4g

**Accrual**

Any annual or sick leave accrued by an employee while in a transferred leave status must be maintained separate from any other leave account.

While a leave recipient is in a transferred leave status annual and sick leave shall accrue at the same rate as if he or she were in a paid leave status, except that the maximum amount of

- annual leave that may be accrued by an employee while in a transferred leave status, in connection with any particular medical emergency, may not exceed
  - 40 hours for a full-time employee or
  - in the case of a part-time employee or an employee with an uncommon tour of duty, the average number of hours of work in the employee's weekly scheduled tour of duty; and
- sick leave that may be accrued by an employee while in a transferred leave status, in connection with any particular medical emergency, may not exceed
  - 40 hours for a full-time employee or
  - in the case of a part-time employee or an employee with an uncommon tour of duty, the average number of hours of work in the employee's weekly scheduled tour of duty.

Leave accrued in the above paragraph

- shall not become available for use by the employee, and
- may not be transferred to the appropriate leave account of the employee
  - until the beginning of the first pay period after the date on which the employee's medical emergency terminates.

**NOTE:** If the leave recipient's Federal service terminates before termination of the medical emergency, no leave accrued under annual or sick leave shall be credited to his or her leave account.

4h

**Termination**

The medical emergency affecting a leave recipient shall terminate at the end of the biweekly pay period when the

- supervisor determines after written notice that the medical emergency has terminated, or by the inability on the part of the leave recipient to substantiate the continuing medical emergency.
- leave recipient's employing agency receives notice that OPM has approved an application for disability retirement for the leave recipient.

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**Termination  
(Continued)**

The leave recipient or a personal representative must provide written notice to his or her supervisor that he or she is no longer affected by a medical emergency.

The supervisor will notify CPO, MER Division in writing of the termination or change in status. CPO, MER Division will

- notify the leave recipient in writing of the effective date and reason for the termination
- forward a copy to the civilian payroll section.

4i

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**Restoration**

When the medical emergency terminates

- the amount of unused transferred annual leave shall be restored to each donor's account by dividing the unused transferred leave by the total number of hours transferred.
  - This ratio will be multiplied by each donor's contribution, rounded to the next whole increment to determine what amount will be restored.
- annual leave will not be restored if the total number of donors exceeds the total number of unused annual leave hours to be restored.
  - Leave must be restored in increments of at least 1 hour.
- annual leave may be credited to the donor's annual leave account
  - in the current leave year or
  - on the first day of the leave year beginning after the date the leave becomes available for return
    - for example, leave available for return 4 June 1989, may be returned as of 4 June 1989 or 14 January 1990.

Donated leave restored before the end of the leave year is subject to the limit on the amount of annual leave that may be carried over to the new leave year.

- For most employees, the limit is 240 hours.

In no case will the amount of leave restored to a donor exceed the amount donated by that donor.

Leave donors may elect to donate restored leave in whole or in part to another leave recipient.

4j

**Program  
Termination**

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This program ends on October 31, 1993.

Donated annual leave may not be transferred to leave recipients after that date.

Leave recipients whose medical emergency has not terminated on October 31, 1993 may continue to use any donated leave credited to their account on or before October 31, 1993 until the termination of their medical emergency.

Direct questions about this program

- to CPO, MER Division
- phone number, 288-2010.

4k

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FOR THE COMMANDER:



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