TOTEM ASSOCIATION OF EDUCATIONAL SUPPORT PERSONNEL,
APEA/AFT (AFL-CIO)

CATASTROPHIC LEAVE PROCEDURES

I. PURPOSE

A. The purpose of Catastrophic Leave is to provide paid leave for TOTEM employees who are unable to work when faced with a major catastrophic event or extreme hardship to themselves or their immediate family.

B. Catastrophic Leave is solely dependent upon donations of personal leave from active TOTEM employees.

   1. Donors must have at least one (1) week’s leave remaining after the donation is deducted as per TOTEM’s Collective Bargaining Agreement, Section 407.

   2. All donated leave, accepted by TOTEM, becomes the “property” of the recipient.

II. EMPLOYEE ELIGIBILITY

A. TOTEM employees must have a minimum of three (3) consecutive days of absence before they are eligible to request Catastrophic Leave.

B. TOTEM employees must be actively employed with the District to be eligible to request Catastrophic Leave.

C. TOTEM employees must be past the 75 workday probationary period before requesting Catastrophic Leave.

D. TOTEM employees must have exhausted all available leave, including personal, accrued comp or flex time and Sick Leave Bank allocations to be eligible to request Catastrophic Leave.

E. TOTEM employees covered under Worker’s Compensation will not be eligible for Catastrophic Leave.

III. PROCEDURES

Applicant

A. Requests for Catastrophic Leave must be submitted on the ASD Leave Bank Application Form, #1385.

B. Applications must be submitted within five (5) workdays of returning to work.

C. Applications and required verification need to be sent directly to the TOTEM office at 3310 Arctic Blvd., Suite 200, Anchorage, AK 99503.

Revised 5/1/2013
D. All requests for Catastrophic Leave due to medical emergencies must be accompanied by a physician’s/psychiatrist’s verification of a serious or emotional debilitating illness including the period of time the employee will be unable to report to work.

E. All requests for Catastrophic Leave due to non medical emergencies must be accompanied by substantiating documentation.

**Donor**

A. Donations must be made on ASD Leave Request Form, #101 and must include:
   a. Name of recipient in the “reason/justification” section.
   b. Amount of time donated in hours.

B. The original form must be mailed or delivered to the TOTEM office.

**TOTEM**

A. The TOTEM President will review all requests and authorize notification to employees.

B. TOTEM will submit the leave donations to Payroll for processing.

C. Catastrophic Leave will be applied retroactively to the recipient for the specific time period designated on the application.

D. Only one (1) donation request per individual will be sent out to employees in a twelve (12) month period.

E. Names of donors will not be provided to the recipient. Upon request from the recipient, TOTEM will send an e-mail “thank you” to donors. Recipients may also thank donors through the TOTEM Newsletter.

**IV. USE RESTRICTIONS**

A. Catastrophic Leave donations can only be used for employee’s regularly scheduled workdays.

B. Catastrophic Leave donations can not be used for vacation (“V”) days which are not scheduled workdays.