

North Oaks Health System

EMPLOYEE EMERGENCY RELIEF

Optional PTO Cash-In Request Form

DEADLINE APRIL 6TH at 8:00 am

Program Guidelines:

- PTO cash-in hours will be paid at **85%** of the base hourly rate
- Employees are allowed to sell up to **80 hours**. No minimum balance requirement.

Form Due to HR	Payment Date
Monday, April 6 th at 8:00 am	Thursday, April 9 th , 2020

Completed Forms should be submitted to Human Resources as follows:

- By email to Bonnie Perrin: perrinb@northoaks.org
- Drop boxes located in the tower lobby and outside the Employment Center
- **Via interoffice mail, please make sure your form will arrive by the deadline to ensure proper processing. Late forms cannot be accepted.**

Employee Authorization:

I request to cash in _____ PTO hours (maximum 80 hours). I also understand the cash-in amount will be a supplemental payment and all applicable taxes will be withheld.

Signature

Date

Printed Name

Employee ID Number

(4 digit Birth Year + Last four digits of SSN + 1 or 2 as applicable)

Department

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