



MAINE SCHOOL ADMINISTRATIVE DISTRICT NO. 75
Merrymeeting Employees Association
Sick Bank Election Form
SY 2023-2024

To: Merrymeeting Employees Association Support Staff Employee

From: Human Resources

As per the Merrymeeting Employees Association Negotiated Agreement, Article IX, Item H(2), you are eligible for membership in the Merrymeeting Employees Association Sick Bank. *Please return this election form to Human Resources no later than **October 1, 2023**.*

Please indicate your selection below:

_____ I hereby authorize two sick days to be deducted from my sick leave balance in order to establish my membership in the Merrymeeting Employees Association Sick Bank.

_____ I choose not to join the Sick Bank at this time.

(Please print your full name)

(Position & Location)

(Signature)

(Date)