USE OF ADVANCED LEAVE

I, the undersigned employee, understand and agree that any amount of leave that I use as advanced leave pursuant to the State of Kansas Leave Advancement policy authorized by Executive Order 09-08 and administered in accordance with Personnel Bulletin 09-05 will be deducted from the sick and vacation leave that I accrue as an employee of the State of Kansas pursuant to K.A.R. 1-9-4 and 1-9-5, beginning with the first pay period following the pay period in which I use advanced leave, until such time as the total amount of hours that I used as advanced leave have been deducted from the sick and vacation leave that I accrue.

I further understand and agree that should I separate from State service before I have accrued sufficient leave to equal the total amount of hours that I used as advanced leave, the dollar amount of the remaining balance of hours that were not deducted from the leave that I was to accrue will be deducted as a lump sum from the last paycheck that I am scheduled to receive from the State of Kansas, for my current term of employment

as a		
(Job Title)		
with the(State Age	ency Name)	
	ansas, as liquidated damages, an amount equat I received that was not recovered prior to	
•	-	my separation
from employment with the Stat	te of Kansas.	
	Employee Name (Printed)	Date
	Employee Signature	Date
	Agency Representative Signature	Date