

Queen Anne County Education Association (QACEA) Sick Leave Bank

Application for Membership

Employee Number: _____

Return to: Building Representative

Or

Send to:

Karen Fields, QACEA President

By BOE mail to Centreville Middle School

Date of Application: _____

Name: _____

Address: _____

Current Assignment and location: _____

Telephone Number: _____

Applicant's Signature: _____

For guidelines regarding the use of the Sick Leave Bank days visit qacea.org.

