CLASSIFIED STAFF UNION

MEMORANDUM

 DATE: May 14, 2022

 TO: All Classified Staff Union Members

 FROM: CSU Executive Board

 SUBJECT: Vacation Buy Back – June 17, 2022 deadline

Please be advised that each year under Article 15, section 18 of our contract members have the option to cash-in 5 (five) vacation days for full value if they meet the following conditions:

**Section 18 – Vacation Buy Back**

* 1. Employees with at least three (3) years of service as of June 1, 2022 shall be eligible to receive as a cash payment an amount equal up to one (1) week of the individual’s accrued vacation leave, provided the following conditions are met:
1. The employee must have requested vacation at least thirty (30) days in advance; and
2. The supervisor has failed to respond to the request within thirty (30) days, and later denies the request; or

(3) The supervisor denies the request initially, and denies a follow-up request seeking to reschedule within thirty (30) days**.**

Documentation that the above conditions exist is required, and may consist of a supervisor’s acknowledgement in writing, copies of an email exchange between the employee and supervisor, or any similar substantiation.

**The decision to cash in vacation leave in accordance with this provision must be made by June 17.** Vacation days cashed in shall be deducted from the employee’s vacation leave balance. Payment shall be made no later than the last pay period in July. **Payments made under this provision shall not be included on base salary for any purpose, including the calculation of retirement benefits or subsequent salary increases.**

If you have any questions, please contact Human Resources at 7-5150.

**UNIVERSITY OF MASSACHUSETTS BOSTON**

**Request For Vacation Leave Buy Back**

To The Department of Human Resources:

In accordance with the provisions of Article 15, Section 18, I hereby elect to use this Vacation Leave Buy Back option. To exercise this option, I understand that I must attach written proof that I asked for and was denied vacation time. I understand that the total of 5 vacation days will be deducted from my vacation leave balance.

### Name of Employee: Employee I.D. Number:

### Title:

**Telephone Extension: Department:**

**Signature of Employee: Date**

**For Payroll Office Use Only**

Years of Service (must be at least 3 years) \_\_\_\_\_\_\_\_\_

# Of Vacation Days Carried \_\_\_\_\_\_\_\_

Adequate Documentation Attached \_\_\_\_\_\_\_\_\_\_