



# CITY OF ROGERS

## Human Resources Office

301 West Chestnut Street, Rogers, AR 72756

Phone 479-621-1117 Fax 479-936-5401

[www.rogersar.gov](http://www.rogersar.gov)

### Paid Time Off (PTO) Enrollment Agreement

A new paid leave policy was adopted by City Council on January 26, 2021 and allows current civilian employees to voluntarily enroll after February 7, 2021. The policy only covers civilian employees, as both the accrual and payout requirements for sworn Police and Fire employees are established by State Law.

Employees hired *before* February 7, 2021 may voluntarily enroll in the new PTO policy at any time in the future. **Upon enrollment, accrued Vacation Leave will be converted at 100% and accrued Sick Leave at 66% to become PTO.** The remaining 34% of previous Sick Leave accrual will be reserved for use only during a future Family Medical Leave Act (FMLA) qualified event, or to be paid out upon separation under the rules stated in Section 17 (B) of the Sick Leave policy. PTO participants leaving employment with one year of service will be paid out under the rules stated in Section 18 (E) of the PTO policy.

Upon converting into the PTO system, employees will accrue within the same tier or years of service as they currently do in the Vacation system. Employees enrolling in this new PTO policy, acknowledge **this agreement to be irrevocable** and in accord with rules further outlined in the most current City of Rogers Employee Policy Manual. **The conversion effective date is based on the pay period beginning after HR/Payroll has been received the form and PTO becomes viewable on the employee's paystub.**

Name \_\_\_\_\_ Department \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Last 4 of Social Security # \_\_\_\_\_

-----FOR HR/PAYROLL USE ONLY-----

Pay Period Ending \_\_\_\_\_

Current Vacation Balance >>>		x 1.0	
Current Sick Balance >>>		x 0.66	+
New PTO Balance			=
Remaining .34 of sick = FMLA Reserve			=

HR \_\_\_\_\_ Payroll \_\_\_\_\_

# PTO ELECTION

## **EMPLOYEE ACKNOWLEDGEMENT OF EMPLOYEE POLICY MANUAL TO BE SIGNED AND FILED WITH EMPLOYEE FILE**

I hereby acknowledge that I have received a copy of the CITY OF ROGERS Employee Policy Manual R-21-04, which includes the Substance Abuse Policy. I understand the contents of the Manual and have discussed with my supervisor or other members of management any portions which need additional explanation.

I hereby explicitly acknowledge that I have read and understand the Rules of Conduct Section 6 contained on page 7 of this manual:

**Initial:** \_\_\_\_\_

I agree to conform to the CITY OF ROGERS rules, regulations, practices, policies, and procedures, whether contained in the Manual or not. I understand that my employment with the CITY OF ROGERS is “at will,” which means that it can be terminated by the CITY OF ROGERS or me at any time, with or without notice, and with or without cause. I understand that no representative of the CITY OF ROGERS, other than the Mayor or City Council, in writing, has any authority to enter into any agreement for employment for any specified period of time, terms, or conditions. I understand that completion of any probationary period does not change any status as an at will employee.

I understand that this Manual contains general information concerning some policies of the CITY OF ROGERS, that the policies stated in this Guide or elsewhere are not contractual, and that the CITY OF ROGERS reserves the right to vary from, revise, supplement, or rescind any portions of this Guide or other policies as it, in its sole and absolute discretion, deems appropriate. I understand that any such variations and changes may be general in nature or with respect to specific circumstances.

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**Employee Signature**

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**Date**

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**Printed Name**