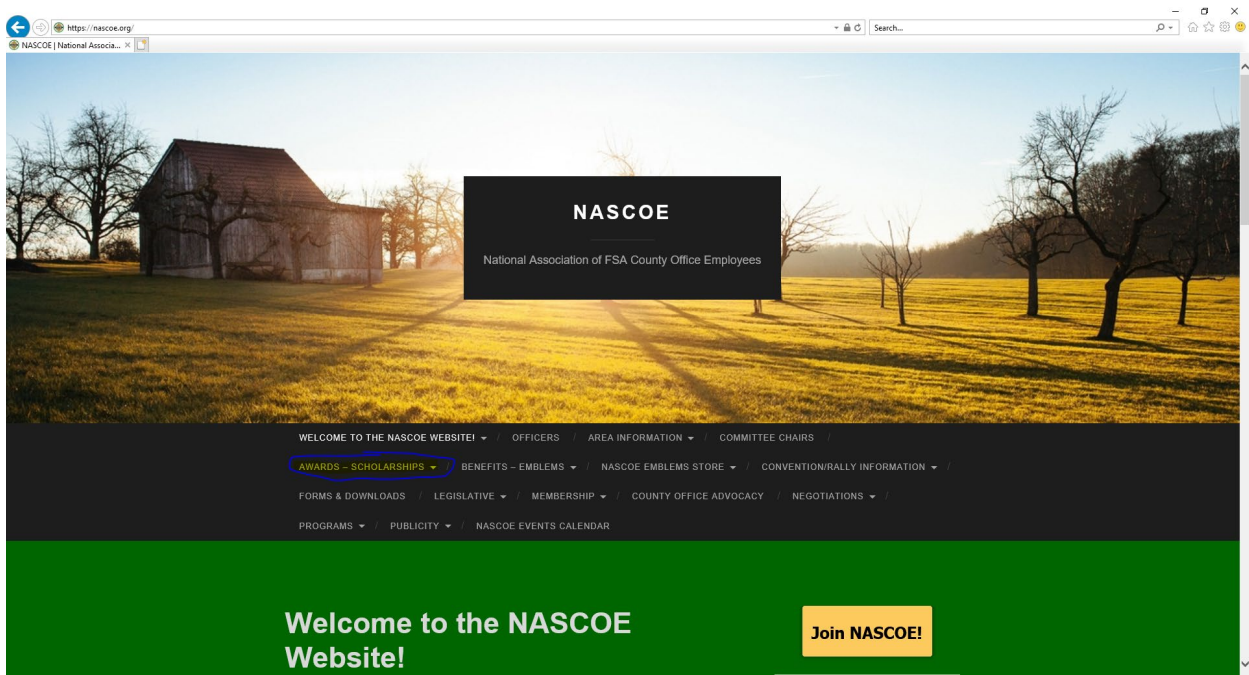
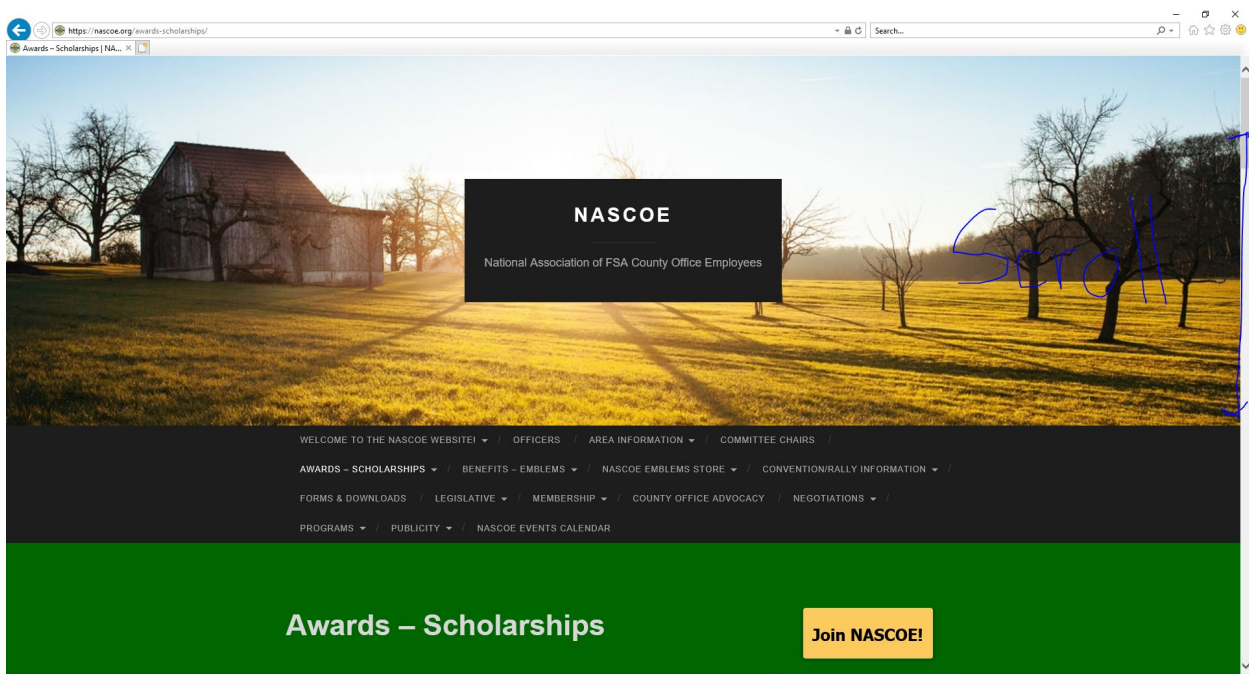


## Sick Leave Instructions

1) Go to [nascoc.org](https://nascoc.org), and select Awards-Scholarships.



2) Scroll down.



3) Click on Submit Sick Leave Awards Here.

https://nascoe.org/awards-scholarships/

## Distinguished Service Awards

This competitive awards program encourages recognition of NASCOE members who make outstanding contributions in the Areas of:

- Service to NASCOE
- Service to FSA-Agriculture; or
- Service to Community.

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## Sick Leave Awards

The Sick Leave Awards program recognizes permanent employees who are NASCOE members in good standing that have accumulated unused sick leave at the following levels:

**Submit Sick Leave Awards Here**

Certificates

- 1000 hours
- 1500 hours
- 2000 hours

Plaques

- 2500 hours
- 3000 hours
- 3500 hours and above of unused sick leave

Follow

### LATEST NEWS

- Buy Emblems – Save Money and Fund Scholarships! November 24, 2019
- Fall 2019 NASCOE Newsletter Now Available November 21, 2019
- NASCOE Legislative Flash – Senate Vote on Continuing Resolution November 21, 2019
- NASCOE Legislative Flash Update – November 19, 2019 November 19, 2019
- Convention Hotel Reservations Now Open! November 4, 2019

### HOT TOPICS

- Awards
- Benefits
- Conventions
- Emblems
- Legislative
- Membership
- NAFEC
- NASCOE News Flash
- NASCOE Video Blog
- Negotiations
- President
- Programs
- Publicity

4) Scroll down.

https://nascoe.org/sick-leave-awards/

**NASCOE**  
National Association of FSA County Office Employees

WELCOME TO THE NASCOE WEBSITE! / OFFICERS / AREA INFORMATION / COMMITTEE CHAIRS /

AWARDS – SCHOLARSHIPS / BENEFITS – EMBLEMS / NASCOE EMBLEMS STORE / CONVENTION/RALLY INFORMATION /

FORMS & DOWNLOADS / LEGISLATIVE / MEMBERSHIP / COUNTY OFFICE ADVOCACY / NEGOTIATIONS /

PROGRAMS / PUBLICITY / NASCOE EVENTS CALENDAR

## Sick Leave Awards

Please submit your sick leave requests by January 15th. Area chairs will validate with

**Join NASCOE!**

5) Fill out and click submit.

## Sick Leave Awards

**Area \***

Midwest Area

**First Name \***

0 of 100 max characters

**Last Name \***

0 of 100 max characters

**County \***

0 of 100 max characters

**State \***

0 of 100 max characters

Please spell the state out. Example: Oklahoma

**Sick Leave Award Eligibility \***

1000 Hours: Certificate