



Idaho Division of Vocational Rehabilitation  
650 W. State Street, Room 150  
Boise, ID 83720  
Phone: (208) 334-3390  
Fax: (208) 334-5305

## MEMORANDUM OF UNDERSTANDING

### **Repayment of Retention Bonus Pay in Case of Separation**

**Compensation.** I understand that effective [DATE], the Idaho Division of Vocational Rehabilitation (IDVR) is prepared to pay a one-time retention bonus to me in the amount of \$2500, as allowed within Idaho Code § 67-5309 and the Executive Branch Agency Policy IF. Retention Award Pay. This bonus will be paid on or about one (1) year after my date of hire, subject to my completion of 2080 hours of service, the absence of any documented problems in my performance during the preceding year, and the following.

**Separation and Repayment Terms.** I also understand that if I voluntarily terminate my employment with IDVR, or am dismissed for cause within the time frames listed below, I will be required to repay the retention bonus as follows:

- a. If I voluntarily resign or am dismissed for cause within six (6) months from the pay date of the retention bonus, I agree to repay the full amount of the \$2500 retention bonus.
- b. If I voluntarily resign or am dismissed for cause after six (6) months, but within one (1) calendar year from the pay date of the retention bonus, I will be allowed to keep \$1,250 without need of repayment.
- c. If I voluntarily resign or am dismissed for cause after more than one (1) calendar year from the pay date of the retention bonus, I will have satisfied my service commitment and will not be obligated to repay any portion of the retention bonus.
- d. All repayments are due in full at termination.

I also understand I am bound by Idaho Code § 67-5309D(3), which states: "the department director and the administrator of the division of human resources are authorized to seek legal remedies available, including deductions from an employee's accrued vacation funds, from an employee who resigns during the designated period of time after receipt of a recruitment or retention bonus."



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A copy of this signed memo will be placed in your personnel file.

\_\_\_\_\_  
Employee Name (Please Print)      \_\_\_\_\_  
Employee Signature      \_\_\_\_\_  
Date

\_\_\_\_\_  
Administrator      \_\_\_\_\_  
Date