Reset Form

Print Form

DHR
09/2008

Mental Health/Developmental Disability/Substance Abuse Services (MH/DD/SAS)
Registered Nurse Sign-on Bonus Agreement
MH/DD/SAS

This agreement, entered into on _____ by and between the
Date

_____, thereafter referred to as the "facility", and
Facility Name

_____, thereafter referred to as "employee".
Employee Name

Terms and Conditions

1. The employee will receive a sign-on bonus of $_____ provided the employee is employed in a permanent full-time or permanent part-time position for 36 consecutive months.

2. The sign-on bonus is not a part of base pay but is considered taxable income and is subject to payroll taxes, 6% deduction for the retirement system, and is included in salary for calculating overtime, if applicable.

3. The sign-on bonus is not included in the calculations for longevity pay.

4. The employee will be paid one-half of the sign-on bonus in the employee's first paycheck following the employee's start date.

5. The employee must remain employed in a registered nurse direct care classification, which may include a supervisor/manager of direct care classification as a registered nurse, for 36 consecutive months to be eligible for the final installment of the sign-on bonus payment.

6. The final installment of the sign-on bonus will be paid on the next regular pay period following the date the employee completes the 36 consecutive months of employment as provided above.

7. The employee must be in pay status to receive credit towards the 36 consecutive months. If the employee is in leave-without-pay (LWOP) status, the time will stop running and will re-start when the employee returns to pay status. If the employee is on worker's compensation leave or military leave, the time will continue to count towards the 36 consecutive months. However, the final installment will not be paid until the employee returns to work and meets the service requirement.

8. The employee is ineligible to receive the final installment of the sign-on bonus if:

    a. the employee's overall performance rating falls below the "good" level;

b. employee receives documented disciplinary action or is terminated from employment by the Facility due to unsatisfactory job performance, unacceptable personal conduct (as those terms are defined by the State Personnel Manual, which is incorporated by reference and made part of this agreement), or any other reason allowed by State law or policy; or
c. before completing 24 months of consecutive service the employee changes from a permanent full-time or permanent part-time 30-40 hour appointment to a permanent part-time appointment of less than 30 hours.

9. The employee is ineligible to receive any other sign-on bonus or the final installment if he/she transfers to another MH/DD/SAS facility before completion of the 36 consecutive months.

10. The employee must repay a prorated amount of the sign-on bonus based on months of service completed if the employee terminates employment with the Facility, either voluntarily or involuntarily, before the completion of 36 months of consecutive service.

Signatures:

The employee understands and agrees to these terms and conditions:

_____ _____

Employee Director of Nursing

_____

Human Resources Manager