

# LOUISIANA STATE UNIVERSITY AGRICULTURAL CENTER

**POLICY NUMBER:** AgCenter PS-36

**EFFECTIVE DATE:** March 9, 1998

**REVISION DATE:** July 1, 2022

**VERSION:** 1

**RESPONSIBLE OFFICE:** AgCenter Human Resource

**CATEGORY:** Administrative

## USE OF AGRICULTURAL CENTER FUNDS FOR RELOCATION INCENTIVE

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### I. Purpose:

To establish a procedure for the disbursement of AgCenter employee relocation incentives.

### II. Policy:

Relocation incentives offer a one-time lump sum payment to an LSU AgCenter employee when it is in the LSU AgCenter's interest to provide an incentive to new or transferred employee to move from one geographic location to another. Relocation incentives will typically be disbursed with the employee's first paycheck following their appointment. Per Internal Revenue Service regulations, all payments are taxable compensation subject to withholding and other appropriate deductions and reported on the W-2 form as part of the employee's total compensation

### III. Definitions:

There are no definitions associated with this policy and procedures.

### IV. Procedure:

#### A. Eligibility:

Offers to permanent, full-time employees (75% effort or more) are eligible to be considered for relocation incentives.

#### B. Amount:

Funds for relocation incentives are the responsibility of the hiring department. Relocation incentives will be up to 1/12 of the employee's base salary not to exceed \$7,500.

**C. Agreement:**

Any employee who receives a relocation incentive must sign a Relocation Agreement, which stipulates the percentage of the payment will be returned if the employee does not continue employment with the hiring department for at least one year, unless advanced administrative approvals are obtained. See Appendix A.

**D. Repayments:**

If an employee who received a relocation incentive does not continue employment with the LSU AgCenter for at least one year, the employee will be responsible for reimbursing the hiring department based on the following schedule:

Employed with the LSU AgCenter less than one calendar year (or less than one academic year for employee on the academic appointment)	Return 50% of the relocation incentive
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**V. Exceptions:**

Repayments may be waived only in justifiable circumstances with the approval of the AgCenter’s Executive Committee and Vice President for Agriculture

**VI. Violations:**

Noncompliance or any employee who is determined to violate this policy statement is subjected to disciplinary action up to and including termination. LSU AgCenter supports an environment free from retaliation. Retaliation against any employee who brings forth a good faith concern, asks a clarifying question, or participates in an investigation is prohibited.

**VII. Resources:**

- LSU AgCenter PS-36 Version 0
- LSU FASOP: HR-06 (Revised June 3, 2021)

**VIII. Additional Information/Questions/Contact:**

Please direct policy questions to the Director/Assistant Vice President for the LSU AgCenter Office of Human Resources

**IX. Appendix A**

Relocation Agreement Form

# LOUISIANA STATE UNIVERSITY AGRICULTURAL CENTER

## Appendix A

### RELOCATION INCENTIVE AGREEMENT

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Name: \_\_\_\_\_ LSU ID Number: \_\_\_\_\_  
Department: \_\_\_\_\_ Title: \_\_\_\_\_  
Position Number: \_\_\_\_\_ Account Number: \_\_\_\_\_  
Start Date: \_\_\_\_\_ Relocation Incentive Amount: \$ \_\_\_\_\_  
Relocation from: \_\_\_\_\_ to \_\_\_\_\_

In accepting this relocation incentive payment, I, \_\_\_\_\_, agree to  
*Employee Name*

Repay the relocation incentive if I do not continue employment with the LSU AgCenter for at least one year. Additionally, I authorize LSU AgCenter to deduct the repayment amount from my pay. The repayment amount for reimbursing the department is based on the following schedule:

Employed with the LSU AgCenter less than one calendar year (or less than one academic year for employee on the academic appointment)	Return 50% of the relocation incentive
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Relocation incentive payments are considered taxable income and are subject to federal, state, and Medicare tax withholding.

Employee Signature: _____	Date: _____
Department Head: _____	Date: _____
HRM: _____	Date: _____
VP Ag [if required]: _____	Date: _____