

### YAVAPAI COLLEGE

### RELOCATION REIMBURSEMENT PROCEDURES

# I. Eligibility

Reimbursement of relocation expenses is allowable to prospective employees to encourage acceptance of an offer of employment. The prospective employee must have accepted a regular, full-time position that was advertised with relocation on the Yavapai College Jobs Website.

The new employee's current residence must be located 50 miles or more from the new work location.

Current employees accepting a position at different Yavapai College center or campus are not eligible.

#### II. Amount

All qualifying full-time regular employees including faculty may receive up to \$3,000 to cover reimbursable expenses, unless posting clarify's a different amount. Amounts above this threshold must be agreed to by the appropriate President, Vice President and the Director of Human Resources.

Reimbursements are limited to actual costs incurred up to the amounts indicated in the new employee's offer letter.

#### **III.** Reimbursable Expenses

Reimbursement for reasonable moving costs by the most economical means may be considered for the following trip including cost of travel, for the employee and their spouse or partner, meals, rental cars and lodging.

- Costs associated with packing and moving of household effects including insurance and fuel for moving trucks and mileage for personal vehicles, reimbursed at \$0.52 per mile,.
- Public transportation costs or automobile expenses if the employee uses their own private vehicle for transporting their immediate family from the principal residence to the new location and meals while on route to the new location.
- Cost of temporary accommodation for the employee and meals for each member of the family.
- Cost of storage of household effects for a maximum period of 30 days.
- Cost of legal expenses associated with buying and/or selling the candidates principle residence.

## Yavapai College Relocation Reimbursement Procedures

Payments through other processes, such as purchasing cards (P-Cards), or direct payments to hotels, airlines, restaurants, car rental companies, or other vendors on behalf of employee which are processed outside of this procedure are not allowed.

#### IV. Tax Implications

Payment or reimbursement of all relocation and moving expenses allowable under this manual will have appropriate taxes withheld and will be reported on the employee's annual Form W-2 as income. The employee should be encouraged to consult with a personal tax advisor.

#### V. Repayment Provision

In the event that an employee voluntarily terminates employment from the College, within 36 months of being hired, the employee will return one-thirty-sixth of the allowance or reimbursement received for each month that the employee is short of the full 36 months.

#### VI. Procedures

The Human Resources Business Partner will include the specific reimbursement amount in the offer letter.

The new employee will provide receipts and the Relocation Reimbursement Form to the Human Resources Office no later than 60 days after the expense has been incurred. Photocopies of receipts will be acceptable. A receipt is defined as a written acknowledgment that a specific service, article or delivery has been made. At a minimum, the name of the payee, date, details itemized list of the items purchased, and amount should appear on the receipt.

The Business Office will process reimbursement through the form of a separate line item on the next payroll processing period after receipts are received.



Relocation Reimbursement For Name:	
Today's date:	
Position start date:	<del>_</del>
Position title:	
Primary Campus or Center:  Prescott Campus	Prescott Valley Center
CTEC Verde Valley Campus	Chino Valley Center Sedona Center
verue valley campus	Scuolla Cellei
Address relocating from:	
	1
Date Item	Amount
	\$
	\$
	\$
	\$
	\$
	\$
TOTAL	\$
employee will return one-thirty-sixth of the a short of the full 36 months. The College may	rminates employment from the College, within 36 months of being hired, the allowance or reimbursement received for each month that the employee is y retain any funds owing to the employee as a valid set off towards this owing for work completed, any sick leave paid, or any vacation time accrued.
I acknowledge that I have read and understa	nd this information.
Employee Signature:	
Please submit this form along with legible or	ened in Adobe in order to electronically sign.*** iginal or copies of receipts to the Human Resources Office days after start date. Call Human Resources at 928.776.2217 if you have any
HR Use Only	
Budget Manager Signature:	Date:
FOAP: 0000.013202.6003.30	