

**MIDDLE TENNESSEE STATE UNIVERSITY
MOVING ALLOWANCE AGREEMENT**

Agreement made on _____ between Middle Tennessee State University (referred to as
(Date)
the University), and _____ (referred to as the Employee).
(Employee's Full Name)

WITNESS:

WHEREAS, the Employee, with employment date effective _____ (employment date) desires to move and relocate his/her residence from _____ (city/state) to _____ (city/state) and the University desires to provide an allowance to help defray the cost of the moving expense, the parties therefore, agree as follows:

1. The University agrees to provide to the Employee an amount not to exceed \$ _____ for moving expenses incurred for the relocation.
2. In consideration for the University providing this allowance, the employee agrees to remain employed by the University for a period of at least one year. For faculty appointed on an academic basis, one year is defined as one regular academic session (Fall and Spring semesters, nine months). For all other annual faculty and employees, one year is defined as twelve months. Should the employee leave employ prior to completion of that year, the Employee will be liable to the University for the amount of the moving allowance provided.
3. The Employee hereby gives the University an express lien on all salaries, wages, and other sums payable to him/her by the University, for the purpose of securing all amounts due under Section 2 above in the event the Employee leaves prior to one year's employment at the University. The Employee authorizes the University to withhold all amounts due under this Agreement from any sum payable to the Employee by the University.
4. If the Employee fails to remain employed as indicated in Section 2 above for reasons beyond his/her control considered sufficient by the University, all or part of the liability under Section 1 may be waived by the University. Any such waiver must be approved in writing by the Employee's department head or dean and the President/Director. (The dean/department head, whose account paid for the Employee's move, must notify Human Resources if the Employee does not remain employed at the University for at least one year.)

Employee (Signature)

President or His/Her Designee (Signature)

Employee (Print or Type)

President or His/Her Designee (Print or Type)

Employee's Social Security No. or M ID

Department Name

Account Number to be Charged

Department Contact & Phone Number