

Date of this Agreement: DD/MM/YYYY

Training Reimbursement Agreement

This Training Reimbursement Contract Agreement (“Agreement”) is entered into by and between CUSTOMIZER: Insert legal Company name, CUSTOMIZER: Insert full address, (“Company”) and Insert full employee name, full address, (“Employee”).

WHEREAS, Company has offered to provide certain external training to Employee, which Company believes will enable Employee to enhance their services to the Company;

WHEREAS, Company is providing such training to Employee in anticipation of the Employee’s continuous employment of at least Insert numerical value of years - example "2" (Insert text value of years - example "two") years so that Company recovers a portion of the benefit of the investment in the training;

WHEREAS, Company and Employee recognize that this Agreement is not intended to constitute any type of employment agreement or guarantee of continued employment;

WHEREAS, the undersigned Employee understands that Company would not provide such training unless Employee intended to continue to work for Company and were to agree to reimburse Company in the event that Employee voluntarily terminates his or her employment prior to Insert numerical value of years - example "2" (Insert text value of years - example "two") years after the conclusion of the training;

NOW, THEREFORE, in consideration of the premises and the promise stated herein, the undersigned Employee agrees that:

1. Company intends to provide the following training (“Training”) to Employee:
 - 1.1 **Training/Course:** Insert training details. The more specific and detailed the better
 - 1.2 **Training Dates:** Insert anticipated dates. If unsure of specific dates, use language such as "anticipated date" or "specific dates unknown but anticipated to be approximately xx
 - 1.3 **Training Cost:** Training costs will not exceed \$.00.
2. Employee will pay for Training costs directly and Company will reimburse Employee upon submission of an approved ‘Request for Payment’ which is a component of Company’s ‘TD-ALL-4220-M. Training or Conference Pre-Approval Form’.
3. Training Costs paid for by the Company on behalf of Employee will be recorded and tracked by CUSTOMIZER: Insert title of individual who will track these expenses until Training is complete, and along with copies of all receipts, invoices and other supporting documentation, will become an integral part of this Agreement.
4. The Training costs incurred will include but may not be limited to:
 - 4.1 Registration fees

- 4.2 Transportation to and from the Training site
- 4.3 Parking
- 4.4 Meals, lodging, salary
- 4.5 Wages for any Training time spent by Employee, including traveling to and from the Training and attending the Training, and any other costs or expenses directly related to the Training incurred by Company.
5. Employee agrees that if some or all components of Training includes **accredited** course(s):
 - 5.1 Employee will complete the 'TD-ALL-4220-M. Training or Conference Pre-Approval Form' to record accredited Training costs for reimbursement by Company.
 - 5.2 Company will not reimburse Employee without official written confirmation of **passing grade or insert your minimum standards for successful passing marks** if Employee paid for the accredited course costs in anticipation of reimbursement by Company.
 - 5.3 If Company incurred the cost of tuition and other related accredited course costs, Company will be repaid costs by Employee if Employee does not provide official written confirmation of **passing grade or insert your minimum standards for successful passing marks** within 30 (thirty) days of the end of the course.
6. If Employee voluntarily terminates their employment with Company, or Company terminates employee for cause within **Insert numerical value of years - example "2"** (**Insert text value of years - example "two"**) years following the date of the completion of the Training, Employee agrees to reimburse Company the cost of the Training incurred by Company as detailed in the following table.

Number of Full Months of Service from the Completion Date of the Training	Reimbursement Percentage (Employee Paid)
1-6 months	100%
6-12 months	75%
12-18 months	50%
18-24 months	25%

7. This Agreement shall be canceled **Insert numerical value of years - example "2"** (**Insert text value of years - example "two"**) years following the date of completion of the Training.
8. Employee expressly authorizes Company to deduct the reimbursement amount owed under the terms of the Agreement from any compensation owed by Company to Employee at the time of, or following, the termination of employment. Employee shall promptly pay to Company the full balance of any amount owed that is not deducted from compensation.

9. Employee may request that a subsequent employer of Employee pay the amount owed to Company by Employee, but Employee shall remain personally liable until the entire amount owed is paid in full.
10. Employee agrees to sign such further documents, if any, requested by Company to confirm the precise sum of the amount owed by Employee to Company following notice by Employee to Company of termination of employment.
11. Employee understands and agrees that any books, computer disks, CDs, original certificates, programming keys, and other documents, lists, catalogs, or information of any kind received in connection with the Training remains the property of Company and must be surrendered upon termination of employment.
12. This Agreement shall be construed under the laws of CUSTOMIZER: Insert jurisdiction, in which the office where Employee is principally employed is located.
13. If any provision or part of a provision of the Agreement is finally decided to be invalid by any tribunal of competent jurisdiction, such part shall be deemed automatically adjusted, if possible. If not possible, it shall be deemed deleted from this Agreement as though it had never been included herein. In either case, the balance of any such provision and of the Agreement shall remain in full force and effect.

IN WITNESS WHEREOF the parties hereto have executed this Agreement as of the day and year first above written.

SIGNED, SEALED AND DELIVERED BY	
CUSTOMIZER: Insert Legal Name of Company:	
Signature	Date
Name of Authorized Signatory	Title of Authorized Signatory

Employee

First Name	<input type="text"/>	Last Name	<input type="text"/>
Title	<input type="text"/>		
Street	<input type="text"/>	City/Customizer: State/Province	<input type="text"/>
Customizer: Zip/Postal Code	<input type="text"/>	Country	<input type="text"/>
Employee Signature		Date	

Witness

First Name	<input type="text"/>	Last Name	<input type="text"/>
Street	<input type="text"/>	City/Customizer: State/Province	<input type="text"/>
Customizer: Zip/Postal Code	<input type="text"/>	Country	<input type="text"/>
Phone	<input type="text"/>	Mobile	<input type="text"/>
Email	<input type="text"/>		
Witness Signature		Date	