[Date]

[Employee Name]

[Address]

**Re: University of California Payroll Staff Transition Program**

Dear [Employee Name]:

The University is currently implementing the UCPath Initiative to transition functions to the UCPath Center. In order to retain certain employees to continue to [fulfill or process or support the fulfillment of] payroll during this transition period, the University has developed the attached University of California Payroll Staff Transition Program (the “Program”). You have been identified as a [Mission Critical or Continuity] employee, which means that the University believes your service in your current position is [essential or important] to the payroll process at [location]. It also means that you are eligible to participate in the Program as set forth in this Retention Letter.

**Your Part in the Program**

If you choose to participate in the Program and if you meet the eligibility requirements set forth below, you will receive the following:

* Retention Pay: At the end of your Retention Period, you will receive up to $[insert amount] in Retention Pay, subject to program eligibility requirements and conditions for payment. Your Retention Period will begin on [date] and we anticipate that your Retention Period will end [milestone]. You must remain employed in your current position through the end of your Retention Period in order to receive Retention Pay.

Note: If applicable, your final Retention Pay amount may be calculated to reflect any salary increases you received during your Retention Period.

* [IF PROVIDING INSTALLMENT PAYMENTS]Retention Pay: During your Retention Period, you will receive up to $[insert amount] in installment retention payments, subject to program eligibility requirements and conditions for payment. Your Retention Period will begin on [date] and we anticipate that your Retention Period will end [milestone]. If you leave your current position before the end of your Retention Period, you will keep any Retention Pay you have already received but you will not receive any additional payments, including prorated.

[Insert payment schedule including project milestones when payments will be made and amounts]

Note: If applicable, your final Retention Pay amount may be calculated to reflect any salary increases you received during your Retention Period.

* Enhanced Severance Pay: You will receive Enhanced Severance Pay in the amount of $[insert amount], subject to program eligibility requirements and conditions for payment, upon your involuntary separation from the University.

Note: If applicable, your final Enhanced Severance Pay amount will be calculated to reflect any salary increases you received during your Retention Period.

* Outplacement Assistance: You will be eligible for outplacement services to assist you in pursuing other employment opportunities. These services will be provided to you toward the end of your Retention Period.

To participate in this Program, you must sign this Letter and return it to your manager by [date]. Your Retention Period will not begin and you will not become a Participant in this Program unless you sign and return this Letter by this date. You should keep a copy of this Letter for your records.

**Eligibility Requirements and Conditions for Retention Pay**

To receive Retention Pay, you must remain employed in your current position, fulfill performance expectations, and work your regular schedule during your Retention Period. Absence from work for any reason of more than 5 cumulative days in any month during your Retention Period will result in a pro rata reduction for only those days over 5 in the amount of Retention Pay you receive for that payment period.

If, during your Retention Period, you do not meet performance expectations, begin serving in another position at the University, voluntarily resign or retire, or involuntarily separate for any reason other than total disability or death, you will keep any Retention Pay you have already received but you will not receive any additional payments. Prorated payments will not be provided.

If at any point during your Retention Period the University decides to shorten the length of your Retention Period, you will receive 60 calendar days’ notice and your final Retention Pay amount will be recalculated. This notice will then govern the terms of your Retention Period, and your signature will not be required.

If at any point during your Retention Period the University decides to extend your Retention Period, you will be presented with a revised Retention Letter to sign. You may choose to agree to the new terms by signing the revised Letter or you may decide, without penalty, to continue under the terms of your original Retention Letter.

**Eligibility Requirements and Conditions for Enhanced Severance Pay**

To receive Enhanced Severance Pay, you must remain employed in your current position, fulfill performance expectations, and be involuntarily separated from that position by the University. You cannot receive Enhanced Severance Pay if you accept another position at any University of California location prior to your involuntary separation. You must sign a Separation Agreement at the time of separation that includes a general release waiving any and all employment-related claims against the University and you must return this signed Separation Agreement to the University within 21 days of the effective date of your involuntary separation. By accepting the Enhanced Severance Pay, you will waive any right you have to regular severance pay and recall/preference for reemployment under University policy or the applicable collective bargaining agreement.

If at any point during your Retention Period the University decides to shorten the length of your Retention Period, your Enhanced Severance Pay amount will be calculated based on your actual years of service upon separation.

If at any point during your Retention Period the University decides to extend your Retention Period, your Enhanced Severance Pay amount will be calculated based on your actual years of service upon separation. You will be presented with a revised Retention Letter to sign and you may choose to agree to the new terms by signing the revised Letter, or you may decide, without penalty, to continue under the terms of your original Retention Letter.

*Repayment*

If you are re-employed in any position at any University of California location at the same or higher salary as the position you held at the time of involuntary separation, you will have to repay to the University any portion of the Enhanced Severance Pay you received that exceeds the time you were involuntarily separated.

**Questions**

If you have questions or concerns about the terms of this Letter, please contact me at [insert phone number] or Human Resources at [insert phone number].

Sincerely,

[Signature]

[Department Manager]

Attachments: University of California Payroll Staff Transition Program Document

 Frequently Asked Questions

cc: Campus Chief Human Resources Officer

 Campus Controller

**By signing and dating this letter below, I acknowledge that I have read and understand the terms and conditions of the University of California Payroll Staff Transition Program applicable to me that are set forth above. I also acknowledge that certain management actions taken under this Program may not be subject to the complaint resolution process under PPSM 70 or the applicable collective bargaining agreement.**

**Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**