

Department Representative:			
Department Name and #:			
Name of Employee or Applicant:			
FSU Employee ID#:		Record #:	
Class Title:		Pay Plan:	Rate of Pay:
Beginning Date of Employment:			
Employee/Applicant's Current Location			
Employee/Applicant's Future Location			

JUSTIFICATION:

No commitment to expend University funds for the payment of moving expenses shall be made without prior approval by the Chief HR Officer. Payment of moving expenses for this employee/applicant is in the best interest of the State of Florida and Florida State University, for the following reason/s:

	Initial appointment where recruitment was difficult
	Regional or National recruitment was necessary
	Transfer in lieu of layoff resulting in relocation
	Lateral or promotional transfer for fully justified broadening of career
	Intra-agency/Geographical transfer for the benefit of the university
	Competitive market requires payment of moving expenses
	Other (attach explanation)

DIRECT PAYMENT TO VENDOR FOR MOVING EXPENSES

The estimated gross weight for which Florida State University will be responsible for payment in connection with this move is _____ Pounds. The cost of this move is estimated to be \$ _____. The department will cover \$ _____ of the cost. Sufficient budgeted funds are available for this expense. The move will be made on or about the date of _____. Approval shall be for the move to take place no later than ninety days after the anticipated date specified. If the cost of the move exceeds the approved estimated cost by an additional 25% or greater, a revised request must be submitted for approval of the additional cost. Moving expense payments of \$10,000 or more must be competitively solicited in accordance with Board of Governors (BOG) Regulation 18.001, FSU Procurement Regulation FSU-2.015, and 2CFR 200.317-326 Uniform Guidance, and follow Procurement Services Policies and Procedures. Consult with Procurement Services for available carriers on contract and information on securing three guaranteed "Not to Exceed" price quotes if move is \$10,000 or more. **The department will be responsible for the normal employer-required FICA taxes**, using funding source _____.

_____	Date	_____	Date
Department Head		Dean/Vice President	
_____	Date	_____	Date
Sponsored Research Admin/Foundation (As required per funding source)		Chief Human Resources Officer	

Remarks:

EMPLOYEE ACKNOWLEDGEMENT FOR TERMS OF MOVING EXPENSES

The employee is responsible for applicable payroll taxes. This payment represents compensation and, therefore, the University will add the value of the moving costs to the employee's wages and the appropriate taxes will be deducted from the employee's earnings. The taxes will be deducted from the employee's biweekly paycheck over three pay periods.

Employees receiving payment of moving expenses must commit to work for the University for no less than the agreed upon contracted year in continuous pay status. If the employee voluntarily terminates employment with the department before 6 months, the employee must return the full amount of the moving expenses to the University before the termination date. Voluntary

termination after 6 months and before 1 year of employment (one academic year for 9- and 10-month faculty) will require 50% to be returned to the University.

Candidate to sign once required approval has been obtained, including appropriate Vice President and Chief Human Resource Officer.

Signature acknowledges Employee's Acceptance of
the Above Terms and Conditions

Date

Note: Copy of approved form must be submitted to Payroll Services for processing.