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Maternity Leave Repayment Agreement

| (IUOE 115) | |
|---|---------------------|
| Employee Name: | |
| Employee Number: | |
| In accordance with the Letter of Agreement – Article 20.05 I have consulted with a Union representative or Shop Stew understanding of my obligations, make the following agree British Columbia. | ard and have a full |
| I agree that 95% of my maternity leave wage differential be paid to me during my leave of absence rather than after my leave of absence and agree to return to work and remain at work for a minimum of six months. | |
| Should I fail to return to work, or having returned to work should I fail to complete six months of service, or if I resign, or if I am dismissed for just cause within six months of my return to work, I agree to repay the University of British Columbia 95% of net wages received during the first week of maternity leave and the 95% of net wage difference paid to me during the following weeks of maternity leave including my share of the benefit premiums/contributions which were deducted during the maternity leave, and I understand that under no circumstances will this repayment be pro-rated. | |
| I understand that if I do not make the required repayment I may be subject to legal action initiated by the University to regain such payments. If I receive notice from the University of British Columbia subsequent to my return that terminates my employment without cause, I will not be obligated to repay any portion of the SEB payments received. | |
| Employee Signature | Date |
| The University of British Columbia Representative | Date |
| IUOE Local 115 Representative* | Date |

^{*}This signature implies no liability on the part of the International Union of Operating Engineers, its local Union 115, or the individual Union Representative.