## CONTINUATION, REDUCTION, OR TERMINATION OF RETENTION INCENTIVE

The basis for paying all retention incentives must be certified **at least annually**, in writing, by the Authorized Agency Official, whether or not there is a written service agreement.

Note: A retention incentive must be terminated if the employee is demoted or separated for cause, receives a rating of less than Fully Satisfactory or equivalent, or otherwise fails to fulfill the service agreement, if applicable. The organization must reduce or terminate the amount/percentage of a retention incentive when conditions change such that the original determination to pay the incentive no longer applies, or when payment is no longer warranted given a change in labor market factors, or an incentive is no longer required to retain the employee(s), or the need for the employee's service no longer justifies the incentive.

EMPLOYEE INFORMATION		
Name:		
Position Title:	Pay Plan, Occupation Series, Grade/Step:	
Organizational Unit:	Duty Station:	
Work Schedule: 🗌 Full-time	$\Box$ Part-time - number of normal hours per pay period:	
REVIEW OF INCENTIVE		
Basis for Review: $\Box$ Annual certification $\Box$ Other	This is a(n): $\Box$ Individual incentive $\Box$ Group incentive	
Effective date of initial incentive: Total amount of initial incentive: Percentage of initial incentive:		
Retention incentive continuation effective: Retention incentive termination (NTE 1 year max):		
Total amount of continued incentive: Percentage of continued incentive:		
Method of Payment: Installment by pay period Lump sum or installments (exceptional cases only describe below)		
Describe:		
JUSTIFICATION FOR CONTINUING INCENTIVE		

Describe, as applicable, how the following factors contribute to the determination that the retention incentive is necessary.

Employment trends and labor market factors.

Recent recruitment efforts.

Special or unique competencies required for the position.

Efforts to use non-pay authorities in lieu of or in addition to retention incentives.

Desirability of duties, work or organizational environment, or geographic location of the position.

Extent to which employee's departure would impair the organization's ability to carry out an activity, perform a function, or complete a project that the organization deems essential to its mission.

## U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES/INDIAN HEALTH SERVICE

Salaries typically paid outside the federal government.

Other supporting factors.

Basis for determination that employee is likely to leave federal service if incentive is not granted.

## SUCCESSION PLANNING

Describe the organization's succession plan for the position for which the incentive is being granted.

Describe the quality and availability of potential sources of employees identified by the organization's succession plan who currently possess the unique competencies required by the position or who with minimal training, cost, and disruption of service to the public could perform the full range of duties and responsibilities at the level performed by the employee.

Describe other efforts in the organization plan to eventually eliminate/reduce the use of retention incentives for the position.

SIGNATURES		
Recommending Official		
Name/Title	Signature	Date
Funds Approving Official		
Name/Title	Signature	Date
Authorized Agency Official Approving Official		
Name/Title	Signature	Date
Human Resources Officer		
Name/Title	Signature	Date
Employee Acknowledgement of Terms		
Name/Title	Signature	Date