

SPECIALIZED TRAINING AGREEMENT

Your Dealership
Any Town, USA

As a technician within the employ of *Your Dealership*, I understand that I may receive specialized professional training. The cost for this specialized training, room and board, commensurate compensation (FRH rate x 8 hrs/day), travel and any training fees or class expenses will be paid by *Your Dealership*. Upon receiving this training I understand that I will personally receive any and all professional recognition, rewards, accolades and/or compensation that may be a result of the specialized skills which I have acquired.

In exchange for this specialized training I agree to remain employed with pay, in good standing, by *Your Dealership*, for a period of no less than three consecutive calendar months for each class/specialized training attended. A class will be defined as, *any time spent within an organized format and taught by an instructor(s) recognized by a professional organization within the automotive industry and purchased by Your Dealership*.

Any one title/subject of a class will be recognized as one class, (i.e. a two day class consisting of more than one specific topic = one class count for each title/subject of instruction).

If I am terminated for due cause, or leave my employment by choice from *Your Dealership*, I understand that at the discretion of management I may be required to reimburse *Your Dealership* financially for any remaining training expenses due within the jurisdiction of this agreement. The actual cost of the training will be amortized based upon calendar work days.

Example: For every one training class I will owe three months of continual employment. If I should decide to leave or am terminated one month after completing the class, then I would owe two thirds of the total costs of the course.

I fully understand the personal and professional obligations and responsibilities within this agreement. I am aware that this agreement in no way represents an employment contract with *Your Dealership*. I agree to allow *Your Dealership* to withdraw from any final paycheck any/all funds necessary to repay this financial obligation.

Class(es) _____ Date _____ Total Class Count _____

Print _____ Date _____

Sign _____ Date _____

Your Dealership Representative _____ Date _____

Notary Public