



Memorandum

#15-115

TO: WIC Regional Directors
WIC Local Agency Directors

FROM: Amanda Hovis, Director
Nutrition Education/Clinic Services Unit
Nutrition Services Section

DATE: November 3, 2015

SUBJECT: IBCLC Contract Agreement

Attached to this memo is a sample International Board Certified Lactation Consultant (IBCLC) contract developed by the state agency. Local agencies can modify and use the contract to require staffs who have utilized local agency funding for IBCLC certification or recertification to stay on and provide lactation services at the local agency for a period agreed upon by both the local agency and the staff. Although optional, local agencies are encouraged to implement this as a staff retention plan.

If you have any questions or require additional information, please contact Faith Njoroge at Faith.Njoroge@dshs.state.tx.us , or (512)-341-4575

IBCLC - Letter of Agreement

WIC Director Name: _____ WIC LA#: _____

Staff Name: _____ Hire Date: _____

Date Certified/Recertified as IBCLC: _____

Pay Back Period - From: date certified/recertified To: _____ months

I, _____, for and in consideration of having been granted the opportunity to prepare and certify/recertify for IBCLC at WIC Local Agency # _____, hereby certify that I have read, understand, and agree to be bound by the terms and conditions of this Letter of Agreement.

1. Upon IBCLC certification/recertification, I will maintain continuous satisfactory:
 ___ Full-time employment thereafter with WIC Local Agency # _____ for a 24-month period; or
 ___ 50% time employment thereafter with WIC Local Agency # _____ for a 48-month period after IBCLC certification/recertification.

2. If I default on any of the provisions of this agreement by separation, or if my employment with WIC Local Agency # _____ is terminated for any reason, I will promptly reimburse Local Agency # _____ all expenses incurred towards the preparation and certification/recertification process.

Signature of Employee _____ Date _____

Signature of WIC Director _____ Date _____

Signature of Umbrella Agency CEO _____ Date _____