



**STATE OF INDIANA REFERRAL  
BONUS PROGRAM**

State Form 53041 (R / 3-22)



**Indiana State  
Personnel Department**

**STATE OF INDIANA REFERRAL BONUS PROGRAM FORM**

In addition to traditional recruiting methods, current state employees can play a key role in the state's talent acquisition strategy. To encourage employee involvement in recruiting talented applicants, the state will offer a financial incentive for successful referrals.

**REFERRAL GUIDELINES:**

A Referring Employee will receive a referral bonus for each referred candidate if the following conditions are met:

- The Referring Employee must be employed by the same agency hiring the Referred Candidate.
- The Referring Employee must have submitted a completed form for the Referred Candidate prior to the date they begin work.
- The Referred Candidate must not be a current state employee or have been a state employee in the twelve (12) months preceding their hire date.
- The Referred Candidate must remain employed with the hiring agency for six (6) months and be performing satisfactorily at the conclusion of that six-month period.
- The Referring Employee must be a state employee at the end of the Referred Candidate's retention period.

Referral Bonus Award: A cash award given to an eligible referring employee for referring a qualified candidate to their employing agency. Gross bonus amounts are as follows:

- \$500 for each Referred Candidate hired for a full-time position;
- \$250 for each Referred Candidate hired for a part-time position; and
- \$100 for each Referred Candidate hired for an intermittent position.

**EMPLOYEE INFORMATION: To be completed by referring employee (type or print legibly)**

Employee Name	Agency
People Soft ID Number	Referral Date (mm/dd/yy)

**REFERRAL INFORMATION: To be completed by referring employee (type or print legibly)**

Referred Applicant Name
Referred Applicant E-mail Address
Referred Applicant Telephone Number
Agency Referred To
Position Referred For

**REFERRAL INFORMATION: To be completed by Human Resources (type or print legibly)**

Date Received (mm/dd/yy)	Hired <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of Contingent Offer (mm/dd/yy)	Date of Hire (mm/dd/yy)
Type of Position Referred to (Full-time, part-time, intermittent)	
Amount of Referral Bonus	
Six Months of Continuous Employment (Referred Employee) <input type="checkbox"/> Yes <input type="checkbox"/> No	
Six Months of Continuous Employment (Referring Employee) <input type="checkbox"/> Yes <input type="checkbox"/> No	
Eligible for Bonus <input type="checkbox"/> Yes <input type="checkbox"/> No	Date processed (if eligible, mm/dd/yy)
If not, why?	
Date Employee Notified (mm/dd/yy)	Bonus Pay Out Date (mm/dd/yy)