



EST. 1957

Blaine Lake Ambulance Care Ltd.

Box 190 Blaine Lake

Office: 497-2616 Fax: 497-2236

bllkambcare@sasktel.net



Return for Service Agreement – Primary Care Paramedic

(The “Agreement”)

Between:

Blaine Lake Ambulance Care Ltd

(The “Blaine Lake Ambulance Care Ltd”)

And:

Name

(The “Applicant”)

Blaine Lake Ambulance Care Ltd. will provide the Applicant the following payment(s):

- a) \$10,000 one-time lump sum recruitment incentive at the time of signing or any time after signing at the request of the Applicant;

The above payment will require the Applicant to guarantee **two (2) year of service**. The Applicant agrees to accept the payment based on and subject to the terms and conditions stipulated in this Return for Service Agreement:

1. The Applicant will attend and successfully complete the Primary Care Paramedic training from a Program recognized in Saskatchewan no later than **date**.
2. The Applicant must acquire and maintain licensure with the Saskatchewan College of Paramedics as a condition of employment with Saskatchewan Health Authority.
3. Within 30 days of successful completion of their program, the Applicant will commence the position with Blaine Lake Ambulance Care Ltd, as per the Conditional Letter of Employment, dated **date**. The Applicant must meet all requisite standards of such employment and continue in such employment Service for two (2) years. The Return for Service obligation represents the equivalent hours of two (2) years of full-time work (1.0 FTE, being 1948.8 hours per year) and not merely two (2) calendar years.

Standby hours will count towards hours worked at a ratio of three to one (3:1), where three (3) standby hours equals one (1) hour worked for the purposes of this agreement.

4. The two (2) year period will be extended if the Applicant:
 - a) Applies for and is granted an unpaid leave of absence. The extension will be for the length of the approved absence and an amended agreement will need to be signed.
 - b) Becomes ill or disabled. The extension will be for the length of the leave due to disability and an amended agreement will need to be signed.
5. The two (2) year Agreement shall be null and void in the event of permanent disability or death occurring during fulfilment of the return for service obligation.
6. The obligations of the Applicant under the Agreement may be adjusted by Blaine Lake Ambulance Care Ltd in its sole discretion in the event of disability or personal crisis occurring during the program.
7. If the Applicant completes the program but fails or refuses to commence employment as a regular full-time Primary Care Paramedic as offered by Blaine Lake Ambulance Care Ltd, then the total amount paid to the applicant is repayable within six (6) months.
8. If the Applicant completes the program but fails to complete the two (2) year return for service obligation, then the Applicant shall be required to pay to Blaine Lake Ambulance Care Ltd a prorated amount of the total amount within six (6) months.
9. If the Applicant completes the program, but fails to pass their probation period of employment, then the Applicant shall be required to pay to Blaine Lake Ambulance Care Ltd a prorated amount of the total amount within six (6) months.
10. The Applicant shall promptly provide to Blaine Lake Ambulance all reports, documents and information relating to the Agreement and the performance of the Applicant's obligations hereunder as Blaine Lake Ambulance Care Ltd may from time-to-time request and in such form as Blaine Lake Ambulance Care Ltd may specify.

11. No delay, neglect, or forbearance on the part of Blaine Lake Ambulance Care Ltd in enforcing against the Applicant any term, condition or obligation of the Agreement shall be, or be deemed to be, a waiver or in any way prejudice any right of Blaine Lake Ambulance under this Agreement, and any waiver of any term, condition, obligation or breach of this Agreement, must be in writing to be effective.
12. This Agreement shall be governed by and interpreted in accordance with the laws in force in the Government of Saskatchewan and any action to enforce this Agreement must be commenced and defended in the Province of Saskatchewan.

IN WITNESS WHEREOF the parties have signed as indicated below.

Signed, Sealed, and Delivered in the presence of:

Per: _____
Applicant

Per: _____
Witness

Date: _____

Date: _____

Per: _____
Blaine Lake Ambulance Care Ltd

Per: _____
Witness

Date: _____

Date: _____

PROMISSORY NOTE

_____, 2023

\$10,000

On demand, I promise to pay Blaine Lake Ambulance Care Ltd \$10,000/(Pro-rated amount) with interest at the rate of five percent per year for value received if I default on this contract.

Applicant Signature: _____

Social Insurance Number: _____

Date: _____