

Terms of Employment Notice

Date of hire: _____

Name of Employee _____

Social Security Number _____

Address _____

In compliance with §41-10-30 of the S.C. Code of Laws, 1976, as amended, you are hereby notified of the terms of employment:

full-time part-time seasonal

1. Normal hours of work:

(i.e., number or range of hours) per week, day, other, etc. _____

2. Rate of pay: Wages \$ _____; Salary \$ _____; Commissions _____%; Other _____

Bonuses: _____ Expenses: _____

3. Payday is: Weekly _____ Bi-weekly _____ Monthly _____ Other _____

Place of payment is _____

Time of payment is _____

Day of payment is _____

4. Deductions to be made from wages such as, but not limited to, insurance deductions. State requirements concerning withholdings may not be the same as Federal requirements.

Any changes in these terms shall be made in writing at least seven calendar days before they become effective.

Additional Terms

The following terms may be provided at the discretion of the employer in accordance with individual company policy.

5. Vacation policy is: _____

6. Paid holidays are: _____

7. Sick leave policy is: _____

8. Other: _____

Employee signature

Company: _____

Employer signature

Address: _____

Telephone: _____