

DATE:	MM DD YY		
SUBJECT:	Employment Agreement		
This is to con	firm the agreement for t	emporary employment between	
Name:	Last Name	First Name	
Address:			
and			
Supervisor:	Last Name	First Name	
Description	of Duties		
Job Title:			
Duties:			
Rate and Pag	yment schedule		
with the Univ		until , <b>at</b> <b>re, no further notice will be fort</b> weeks notice by either party.	which time your employment the homing. Please note that the
The hourly rat cheque.	e of pay will be \$	per hour with the 4% vacatio	n indemnity paid with each pay
		nation and it is required that you ke I to evaluate that it meets the sta	
I understand th	ne terms and conditions st	ated in this agreement.	
Printed Name		Signature	Date
Supervisor			
Printed Name		Signature	Date