



# Sample Employment Agreement

Used to outline the agreed upon position, signed by the family and nanny, and kept on file

## EMPLOYMENT AGREEMENT

### Employer

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Business: \_\_\_\_\_

### Employee

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

### Offer of Employment

Job title: \_\_\_\_\_

## JOB DESCRIPTION

Childcare: Yes  No

Number of children: \_\_\_\_\_

Ages of children: \_\_\_\_\_

Childcare responsibilities:  
\_\_\_\_\_  
\_\_\_\_\_

Housekeeping responsibilities:

Yes  No

Will employee be required to provide pet care?

Yes  No

Does the employee have any additional responsibilities?  
\_\_\_\_\_

## WAGES AND WORK AVAILABILITY

Gross wages of:  
\$ \_\_\_\_\_ weekly \$ \_\_\_\_\_ monthly

Frequency of pay:  
 Weekly  Bi-weekly  Monthly

Hours of work:  
\_\_\_\_\_ /week

Schedule of hours:  
\_\_\_\_\_

Number of days off:  
\_\_\_\_\_ /week

Which days?:  
\_\_\_\_\_

Overtime rate:  
\_\_\_\_\_ /hour to be paid after \_\_\_\_\_ hrs

## VACATION

Weeks of vacation time with pay:  
2 weeks every year

\_\_\_\_\_ Income Tax deductions will be taken at  
source

Paid general/public holidays: \_\_\_\_\_

\_\_\_\_\_ The employer will make contributions to  
Canada Pension Plan and to Employment  
Insurance

Days of paid sick leave: \_\_\_\_\_/year

Other leave: \_\_\_\_\_

Duration of employment:  
\_\_\_\_\_

The employer agrees to provide the employee  
with information regarding wages and  
approximately amounts of deductions from pay.

## QUALIFICATIONS

First aid: Yes  No

Police background check: Yes  No

Date:  
\_\_\_\_\_

Date:  
\_\_\_\_\_

## TERMS OF SEPARATION

The employer and the employee agree to abide by provincial labour standards regarding written  
notice of termination of employment.

Amendments to this contract must be made in writing and agreed to by both parties.

## SIGNATURE OF EMPLOYER

I certify that the duties outlined above are  
accurate and correct.

I will abide by provincial labour standards.

I will provide a Record of Employment on  
termination of employment.

Signature:  
\_\_\_\_\_

Date:  
\_\_\_\_\_

## SIGNATURE OF EMPLOYEE

I have read the employment agreement and  
understand it.

Signature:  
\_\_\_\_\_

Date:  
\_\_\_\_\_