

Contract Of Employment

To be used in conjunction with the Staff Handbook.

<p style="text-align: center;">Your Name/Business Name</p>	<p style="text-align: center;">Employee's name</p>
<p style="text-align: center;">Your Place of Work Will Be (YOUR BUSINESS ADDRESS)</p> <p style="text-align: center;">You may be required to work elsewhere on a temporary or permanent basis as required by the needs of the business</p>	<p style="text-align: center;">Date Employment Commenced DD/MM/YYYY</p>
<p style="text-align: center;">Your Rate Of Pay Will Be £0.00 per hour/week, this will be paid on a (day) every week/month, into your bank/building society</p>	<p style="text-align: center;">Your hours of work will be 0 worked over 0 days</p>
<p style="text-align: center;">Sick Pay</p> <p style="text-align: center;">All employees are entitled to Statutory Sick Pay (SSP) in accordance with the law. For details regarding SSP please refer to the Staff Handbook.</p>	<p style="text-align: center;">Holiday Entitlement</p> <p style="text-align: center;">Please refer to the Staff Handbook for your holiday entitlement and pay details.</p>
<p style="text-align: center;">Notice</p> <p style="text-align: center;">Depending on your level of service you are required to give and receive notice, for details of notice periods please refer to the Staff Handbook.</p>	<p style="text-align: center;">Maternity Rights</p> <p style="text-align: center;">All women who are pregnant are entitled to the rights in accordance with the law. For details regarding maternity rights please refer to the Staff Handbook.</p>

Discipline & Grievance Procedures

Please refer to the Staff Handbook for details regarding our discipline, grievance and appeals policies

Health & Safety At Work

In accordance with the law we will provide you with a safe, secure and healthy working environment.

For Full Details Of The Terms And Conditions Of Employment Please Read The Staff Handbook

Absences From Work

Please refer to the Staff Handbook for details relating to absences from work.

Duration Of Contract

This contract is not permanent and is expected to expire on **DD/MM/YYYY**

**Signed On Behalf Of
(Your Business Name)**

Signed By The Employee

**Name And Job Title
(Your Name And Job Title)**

I agree to the terms and conditions of this contract, and acknowledge that I have received a copy

(Employee Name)

**Date
DD/MM/YYYY**

**Date
DD/MM/YYYY**

PLEASE DELETE*It is recommended you have your solicitor examine any contract you are preparing for your employees as once these are signed by both parties they are legally binding and must be adhered to*****