NOTICE TO EMPLOYEE

Labor Code section 2810.5

EMPLOYEE		
Employee Name:		
Start Date:		
EMPLOYER		
Legal Name of Hiring Employer:		
Is hiring employer a staffing agency/business (e.g., Temporary Services Agency; Employee Leasing Company; or		
Professional Employer Organization [PEO])? ☐ Yes ☐ No		
Other Names Hiring Employer is "doing business as" (if applicable):		
Physical Address of Hiring Employer's Main Office:		
Hiring Employer's Mailing Address (if different than above):		
Hiring Employer's Telephone Number:		
If the hiring employer is a staffing agency/business (above box checked "Yes"), the following is the other entity for whom this		
employee will perform work:		
Name:		
Physical Address of Main Office:		
Mailing Address:		
Telephone Number:		
WAGE INFORMATION		
Rate(s) of Pay: Overtime Rate(s) of Pay:		
Rate by (check box): Hour Shift Day Week Salary Piece rate Commission		
☐ Other (provide specifics):		
Does a written agreement exist providing the rate(s) of pay? (check box) □ Yes □ No		
If yes, are all rate(s) of pay and bases thereof contained in that written agreement?		
Allowances, if any, claimed as part of minimum wage (including meal or lodging allowances):		
(If the employee has signed the acknowledgment of receipt below, it does not constitute a "voluntary written agreement" as required under the law between the employer and employee in order to credit any meals or lodging against the minimum wage. Any such voluntary written agreement must be evidenced by a separate document.)		
Regular Payday:		

WORKERS' COMPENSATION		
Insurance Carrier's Name:		
PAID SICK LEAVE		
Unless exempt, the employee identified on this notice is entitled to law which provides that an employee: a. May accrue paid sick leave and may request and use up accrued paid sick leave per year; b. May not be terminated or retaliated against for using or c. Has the right to file a complaint against an employer what the requesting or using sick days; 2. attempting to exercise the right to use paid sick days; 3. filing a complaint or alleging a violation of Article 1. 4. cooperating in an investigation or prosecution of an apolicy or practice or act that is prohibited by Article The following applies to the employee identified on this notice: (C. □ 1. Accrues paid sick leave only pursuant to the minimum requirements of Labor Code \$246. 2. Accrues paid sick leave pursuant to the employer's policy where requirements of Labor Code \$246. 3. Employer provides no less than 40 hours (or 5 days) of paid 4. The employee is exempt or partially exempt from paid sick subsection for exemption):	to 5 days or 40 hours, whichever is greater, of requesting the use of paid sick leave; and ho retaliates or discriminates against an employee for 5 section 245 et seq. of the California Labor Code; alleged violation of this Article or opposing any 1.5 section 245 et seq. of the California Labor Check one box) irements stated in Labor Code §245 et seq. with no as for accrual and use of paid sick leave. Thick satisfies or exceeds the accrual, carryover, and use 1 sick leave at the beginning of each 12-month period. leave by Labor Code §245.5. (State exemption and	
EMERGENCY OR DISASTER DISCLOSURE		
There is a state or federal emergency or disaster declaration applicable to the county or counties where the employee will work issued within 30 days before the employee's first day of employment and that may affect their health and safety during employment. (State emergency or disaster declaration and how it may affect health or safety)		
ACKNOWLEDGEMENT OF RECEIPT		
(PRINT NAME of Employer representative)	(PRINT NAME of Employee)	
(SIGNATURE of Employer Representative)	(SIGNATURE of Employee)	
(Date)	(Date)	
The employee's signature on this notice merely constitutes acknowledgement of receipt.		
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Labor Code section 2810.5(b) requires that the employer notify you in writing of any changes to the information set forth in this Notice within seven calendar days after the time of the changes, unless one of the following applies: (a) All changes are reflected on a timely wage statement furnished in accordance with Labor Code section 226; (b) Notice of all changes is provided in another writing required by law within seven days of the changes.