

CASUAL WORKER AGREEMENT - CONSTELLATION

NAME OF COMPANY: Compass Services (UK) Ltd, Registered Office ("The Company") Parklands Court, 24 Parklands, Birmingham Great Park, Rubery, Birmingham B45 9PZ.

NAME OF WORKER:.....

ADDRESS: DATE OF BIRTH:.....

.....

..... TELEPHONE NUMBER.....

START DATE:

RATE OF PAY: Roles vary by rates and confirmed at time

of booking.

JOB TITLE: Constellation Team member

PLACE OF WORK: CONSTELLATION– Locations will vary as per bookings

I agree to work for the Company on a casual basis in the capacity stated above. I understand the Company is under no obligation to provide me with work and there are no regular hours of work. I understand that I am under no obligation to work if asked to do so by the Company.

The Company reserves the right in its absolute discretion to give or refuse to give work at any time and will not give any reasons for its decision.

I understand that my earnings will be subject to deductions for both Income Tax and National Insurance in any week where they exceed the Government's current minimum earnings level.

As a casual worker, I accept I am not entitled to any Company benefits and that this agreement can be terminated at any time without notice by either party.

Records of my work for the Company are used only for business purposes in compliance with the Data Protection Act 1998.

I understand that the Working Time Regulations 1998 apply to casual workers and will qualify for 28 days paid holiday (inclusive of public holidays) per annum pro rata. The Payroll Department will be able to calculate entitlement to holiday pay under the Working Time Regulations on request.

Working Time Regulations 1998

The Working Time Regulations govern aspects of employment in relation to hours worked, break entitlements and days off. The provisions vary for Adult and Young (under 18 years old) workers. The law states that a legal maximum of 48 hours a week (on average) must not be exceeded without the consent of the adult worker. The purpose of this form is to allow you to give your consent to working in excess of 48 hours per week (on average) if you so wish.

Please read the below carefully and make sure you fully understand its purpose, do not hesitate to ask a member of the management team if you are unsure of anything. The completion of this form is voluntary – the Company will not condone any management action amounting to pressure or compulsion.

1. I confirm that I am aware of my entitlement to work a maximum 48-hour working week as specified in the Working Time Regulations 1998, and wish to be restricted to this

Or

2. I do not wish to be restricted to working a maximum of 48 hours on average each week, until
(Insert specific date, not more than 5 years ahead)

Do you wish to opt out (2) Yes or No

I understand that I can cancel my consent by giving 1 months' notice in writing.

I confirm that I have made this decision independently and have not had any pressure put on me by my manager and/or the Company. I am aware that this form will be kept on my Employee File and reviewed on an annual basis.

I have a legal duty to observe all Health & Safety and Food Hygiene rules and regulations. I am required not to engage in or permit any fellow worker or colleague to engage in any sexual, racial, disability or other harassment or unlawful discrimination against any other person during my work for the Company. I agree to make myself aware of the Company Equal Opportunities policy.

I understand that I will be made aware of any local working rules applicable to the above Unit. I confirm that I have retained a copy of this letter.

I confirm the above information is correct and that I have read, understood and agree to be bound by the Casual Staff Agreement and the Working Time Regulations:

SIGNED:

(the Worker)

SIGNED: *R Ashton*

(for and on behalf of the Company)

PRINT NAME:

DATE:

PRINT NAME: Ryan Ashton

POSITION: Director Constellation

DATE: