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, 20			
RE: OFFER OF EMPLOYMEN	Т		
Dear	_:		
We are pleased to extend an of [Title]	fer of employment as	s a [Full name].	reporting to
Your job responsibilities are as	follows:		
Salary: Your beginning comper	nsation rate will be (C	Check one)	
☐ Annual: an annual salary of \$	paid (Che	ck one) Weekly B	i-weekly □ Monthly
☐ (Check if applicable)	In addition, you also	will be paid a commiss	ion based on
subject to company dec		n will be paid in accorda	ance with our policies, which is
subject to company dec	isions and updates.		
☐ Fixed wage: \$ per			
☐ (Check if applicable)			ion based on ance with our policies, which is
subject to company dec		ii wiii be paid iii accorde	with our policies, which is
☐ Commission: a commission be accordance with our policies, w	pased on	This co	ommission will be paid in
accordance with our policies, w	hich is subject to con	npany decisions and up	dates.
Benefits: You may choose to p	articipate in the follow	wing benefits, if eligible:	(Check all applicable)
☐ Health insurance☐ Pension plan			
☐ Life insurance			
☐ Disability insurance			
☐ Other:			
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Please find in the attachment further details about benefits.

<u>Reimbursement:</u> Following are the expenses you will be reimbursed in accordance with our policies, which may be modified from time to time: (Check all applicable)



□ Travel expenses
□ Meals
☐ Business supplies
☐ Education or training
□ Other:
Daild Time Offic Very will be antified to the days of maild very time and an analysis of maild very time and
<u>Paid Time-Off:</u> You will be entitled to days of paid vacation per year of employment, in accordance with our paid leave policies, which is subject to company decisions and updates.
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You will be entitled to (Check one) □ paid □ unpaid sick leave of days to be allocated for illness or
personal business (Check one) each □ calendar year □ employment year □ other: in
accordance with our sick leave policies, which is subject to company decisions and updates.
☐ (Check if applicable) Background Screening: This offer is contingent upon a successful completion of
your background check results. Please be noted that the start date may be prior to the background check
completion. Should the background report not meet [Company name]
standards, termination of the employment may occur.
☐ (Check if applicable) At Will Employment: Please note that [Company
☐ (Check if applicable) At Will Employment: Please note that [Company name] is an at-will employer, meaning either you or [Company name] are free
to end the employment relationship, with or without notice or cause, at any time.
Your official start date will be, 20 Feel free to contact me via email or phone at We expect to receive your response by
or phone at we expect to receive your response by
, 20 regarding whether or not you will accept this offer of employment.
☐ (Check if applicable) Please be reminded that this letter does not serve as an employment agreement.
Should you accept the position, an employment agreement is required to formalize the decision.
We are looking forward to having you on our team in the near future.
Sincerely,
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