EMPLOYEE MEAL BREAK WAIVER FORM

I understand that I am entitled to a 30-minute duty free unpaid meal period for every five hours of work. I understand that I may waive meal periods under the following circumstances: _lf I work no more than six hours on any given workday, I may waive my right to a meal period. By checking the box next to this paragraph and signing below, I am confirming that I am voluntarily electing to waive my employer's obligation to provide a thirty minute uninterrupted meal period on any day I work six or fewer hours. I understand that any day I work more than six hours, this waiver is invalid. I understand that I may revoke this waiver at any time by providing written notice of the decision to do so. √ If I work more than ten hours, but no more than twelve hours, I understand that I am entitled to two thirty minute uninterrupted meal periods. By checking the box next to this paragraph and signing below, I am confirming that I am voluntarily electing to waive my employer's obligation to provide a second thirty minute uninterrupted meal period, so long as any day that I waive my second meal period I will work no more than twelve hours and I have been provided a timely uninterrupted first meal period of 30 minutes. I understand that I may revoke this waiver at any time providing written notice of the decision to do so. As a courtesy and for planning purposes, College Track would appreciate receiving notice of revocation the day prior to the revocation taking effect. Ássociate Signature Print Name