|  |
| --- |
| **CONTRACT OF EMPLOYMENT** |

|  |  |
| --- | --- |
| **Employer:** | ID No.:  |
| Address:  | Telephone:  |

**Employee**

|  |  |
| --- | --- |
| Name:  | ID No.:  |
| Address :  | Telephone:  |
| Address, if other:  | Telephone:  |
| Next of kin/wife/husband:  | Telephone:  |
| Education/certification:  |

**Field of work**

|  |
| --- |
| Job title/brief description of work:  |
| Place of work:  | [ ] Various places of work | First day of work |

**Working time**

|  |  |  |  |
| --- | --- | --- | --- |
| [ ] Full time work 100% | [ ] Part time ratio | % |  |
| [ ] Daytime / [ ] Shifts  |  Hours at day/week | From hours.  | To hours.  |
| [ ] Fixed overtime |  Hours at day/week | Other: |

**Wages**

|  |  |  |  |
| --- | --- | --- | --- |
| [ ] Acc. to collective agreement | [ ] By agreement | Wages ISK./month.  | Pay grade./ Pay scale  |
| Daytime pay | ISK/ per hour | [ ] Other payments |
| Overtime pay | ISK/ per hour |  |
| [ ] Shift premium | [ ] Acc. to collective agreement | [ ] Other | % on time from/to:  |
| [ ] Bonus/wage premium  | [ ] Perquisites |
| [ ] Piecework  | Price/unit |  |
| Form of payment  | [ ] Monthly[ ] Check | [ ] Fortnightly[ ] To account nr. | [ ] To weeks | [ ] Weekly |

**Period of engagement**

|  |  |  |  |
| --- | --- | --- | --- |
| [ ] Unspecified | [ ] Fixed term from | to  | and employment ends without resignation. |
| [ ] Specific task/event: | and employment ends without resignation. |

**Term of notice, vacation allowance and sick payments**

|  |  |
| --- | --- |
| [ ] Acc. to collective agreement | [ ] Special provision |

**Acquired rights**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| [ ] Compare to earlier employment of the company |  year |  month. | [ ] Compare to vocation |  year |  month. | [ ] Other |

**Collective agreement**

|  |
| --- |
| The employee's right and duties, are covered by this collective agreement:  |
| Pension fund: | Trade union: |

**Other agreements**

|  |
| --- |
| [ ] cf. enclosure. |

 Place Date.

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 Signature of the employer Signature of the employee