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| **CONTRACT OF EMPLOYMENT SHIFT WORK** |

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

**Employee**

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

**Field of work**

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

**Working time**

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

**Wages**

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| --- | --- | --- | --- |
|  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 agreements |  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**

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| --- | --- |
|  Acc. to collective agreement |  Specific provision |

**Acquired rights**

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

**Collective agreements**

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

**Other agreements**

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|  cf. enclosure. |

 Place Date.

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 Signature of the employer Signature of the employee