**EMPLOYMENT AGREEMENT**

**Employer**

Name: \_Serina & Robert Carbone\_\_\_\_\_\_\_\_\_\_

Address: \_\_167 Gowland Drive, Binbrook ON, L0R1C0\_\_\_\_\_\_\_\_\_

Telephone: 289-925-7082 (Serina) 905-869-5553 (Robert)\_

**Employee**

Name: \_\_\_Sarah Rattray \_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone: \_\_289-680-5180\_\_\_\_\_\_\_\_\_\_\_\_

Offer of Employment

Job title: \_Mother’s Helper / Nanny\_

**JOB DESCRIPTION**

Number of children: 1

Ages of children: \_\_\_\_\_\_\_\_1 Month\_\_\_\_\_\_

Childcare responsibilities:

Supervision, Diapering, Bottle feeding natural breast milk (as required), tummy time games, reading stories, putting down for naps

Housekeeping responsibilities:

Vacuuming, Swiffering (damp mop with spray), dusting, laundry, emptying & loading dishwasher or sink /bottle tray, wiping down glass surfaces and stainless appliances.

Pet Care:

Feeding Cats & Dog as requested, taking dog for walk alone or with baby\*. (Infrequent)

**WAGES AND WORK AVAILABILITY**

Start Date: February 20th, 2017

Gross wages of:

$180 /weekly $720 /monthly

Frequency of pay:

Bi-weekly

**Hours of work:**

\_17 hours/ week (flexible to increase and/or include alternate days, evenings or weekends, if required and agreed upon by both parties. Additional pay for extended hours at rate listed above of $12/hour)

**Schedule of hours:**

Mon 8:00 – 2:00

Wednesday 8:00 – 2:00

Thursday 8:30 – 1:30

Please note employer(s) may or *may not* be on premises during these hours working in their home office. It should not be expected that they are present at all times employee is working.

**VACATION / LEAVE**

Employee to provide minimum 2 weeks’ notice of any desired vacation or required leave.

**SICK DAYS**

Employee to contact employer as soon as it is apparent work will be missed, by phone.

**QUALIFICATIONS**

First aid: Yes X

(Please provide photocopy of record)

Date:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Police background check: Yes X

(Please provide photocopy of record)

Date:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TERMS OF SEPARATION**

Amendments to this contract must be made in writing and agreed to by both parties. The employee agrees to provide a minimum of 2 weeks’ notice in request for termination.

**SIGNATURE OF EMPLOYER**

I certify that the duties outlined above are accurate and correct.

Signature:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SIGNATURE OF EMPLOYEE**

I have read the employment agreement and understand it.

Signature:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_