ASSIGNMENT DETAILS AND PAY ACKNOWLEDGMENT

Complete a new form for each assignment or material change

Employee and Assignment

Employee name: _____	Employee ID: _____
Client/host employer: _____	Worksite: _____
Position/title: _____	Supervisor/contact: _____
Assignment start date: _____	Expected end/date or duration, if known: _____

Schedule and Pay

Regular pay rate: $_____ per hour / salary: $_____	Pay frequency: _____	
Overtime rate or basis, if applicable: _____ _____		
Shift: [ ] 1st [ ] 2nd [ ] 3rd [ ] Weekend [ ] Rotating	Scheduled hours/days: _____	
Reporting time: _____	Meal period: _____	Timekeeping method: _____
Payday and payment method: _____ _____ _____		

Requirements and Conditions

Dress/PPE requirements: _____
Required certifications/equipment: _____
Background/drug screening status: [ ] Complete [ ] Pending [ ] Not required
Special instructions, attendance contact, parking or entrance:
_____
_____

Acknowledgment

- I received the assignment information shown above and understand how and when to report.
- I will accurately report all hours worked and will promptly tell Huff Consulting about missing, incorrect, or disputed time.
- I understand that overtime may require advance approval, but all time actually worked must be reported.
- I understand that the assignment, schedule, duties, and duration may change or end. Any change to my pay rate must come from Huff Consulting in writing.
- I will contact Huff Consulting promptly if the client changes my duties, worksite, schedule, equipment, or hazards in a way that affects my qualifications, safety, or pay.

Employee Signature: _____	Date: _____
Huff Representative: _____	Date: _____