

TERMS OF ENGAGEMENT FOR AGENCY WORKERS(CONTRACT FOR SERVICES)

Agency Worker.

Candidates name. _____

Candidates address. _____

I am pleased to confirm your appointment with HCR SERVICES. This document outlines the Terms and Conditions which apply to your contract and other information which is relevant to your employment.

1. The commencement date of this contract is
2. You agree to be available for work, should HCR, offer you work. However, HCR has no obligation to offer you work at any time, and you are not entitled to a minimum number of hours of work per day, week or year.
3. If HCR, does offer you work, you are required to accept and complete it to the organisation's satisfaction. Where HCR, offers work to you, it does not give rise to a presumption that it will offer you any further work..
4. You will be subject to the terms and conditions as agreed and amended from time to time by the Company as outlined in its policies, procedures, handbooks and other relevant documents.
5. You will be paid a minimum hourly rate of £8.50. Your pay will be calculated according to the number of hours that you work.
6. If the Company makes an overpayment to you to which you are not entitled, or is more than that to which you are entitled, you agree to allow the Company to recover the overpayment by deductions from your salary or other payments due to you. Any deductions will normally be made over the same period that the overpayment was made. It is in your interests to regularly check your pay slips.
7. You will be paid weekly, every Friday, in arrears to a bank account of your choice
8. You are obliged to give the Company 1 weeks notice to terminate your contract of employment. The Company is obliged to give you the statutory minimum amount of notice before terminating your contract.
9. You are expected to comply with the Company dress code.
10. Should the need for disciplinary action be deemed necessary, this will be taken in accordance with the Company Policy and Procedure on Disciplinary Action. You have a right of appeal against this as outlined in the Procedure.
11. If you have a grievance in relation to your employment, then you should follow the procedure outlined in the Company Grievance Policy and Procedure. You should initially discuss any grievance with your immediate superior.
12. You are required to report any sickness absence as soon as is practicably possible to your immediate superior, and provide certification of sickness in line with Company policy. You should not accept a work assignment if you know that you will be unable to work all or any of the hours agreed because of sickness or injury.
13. In the course of your employment you may have access to confidential material both in paper and electronic form. On no account should this information be divulged to any unauthorised person. Breaches of confidentiality will be dealt with through the Company Policy and Procedure on Disciplinary Action.

14. The Company has a strict anti-bribery and corruption policy in line with the Bribery Act (2010). If you bribe (or attempt to bribe) another person, intending either to obtain or retain business for the company, or to obtain or retain an advantage in the conduct of the company's business this will be considered gross misconduct. Similarly accepting or allowing another person to accept a bribe will be considered gross misconduct. In these circumstances you will be subject to formal investigation under the Company's disciplinary procedures, and disciplinary action up to and including dismissal may be applied.
15. It is a condition of your employment that the Company is satisfied on your medical fitness to carry out your duties. This appointment is conditional on a satisfactory Occupational Health Service / Company Doctor assessment. Should it be deemed necessary during the course of your employment, you may be required to attend for a medical examination from the Company Doctor / Occupational Health Service.

If you are in agreement with the above terms and conditions please sign this statement,

Yours sincerely,
William Collins

Snr Area Manager
HCR SERVICES

FORM OF ACCEPTANCE: I accept this appointment on the terms and conditions stated above,

SIGNATURE _____

DATE _____

Head Office

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