**Notice of Acknowledgement of Pay Rate and Payday**

**Prepared for Non-Exempt Employees - Provided at Time of Hire**

*Please complete this form & return a signed copy to Human Resources on your First Day of Employment.*

|  |  |
| --- | --- |
| **Name:** |  |
| **Title:**  |  |
| **Department:**  |  |
| **Employer Information:** | Iona College715 North AvenueNew Rochelle, NY 10801914-633-2000 |
| **Employee’s pay rate(s):**  | **$** | per hour |
| **Regular payday**: | Friday |
| **Pay is**: | Bi-weekly  |
| **Overtime Pay Rate:** | $ |
| **Allowance(s) taken:** | None | Other:  |

**Check all that apply:**

|  |  |
| --- | --- |
|  | I have been given this pay notice in English because it is my primary language. |
|  | My primary language is . I have been given this pay notice in English only, because the Department of Labor does not yet offer a pay notice form in my primary language.  |
|  | While my primary language is , I hereby accept this notification, and all future notifications in English. |

**Employee Acknowledgement:**

On this day I have been notified of my pay rate, applicable allowances, and designated payday on the date given below. I told my employer what my primary language is.

Print Employee Name Preparer’s Name and Title

 February 12, 2016

Employee Signature Date