

Employee notice

1. Employee:		Address:	
Phone number:		Email address:	
Date employment began:			
2. Legal name of employer:		Main office/Principal place of business address:	
Phone number:		Email address:	
Operating name of employer (if different):			
Mailing address (if different):			
3. Employment status (exempt or non-exempt):			
<input type="checkbox"/> Employee is exempt from: <input type="checkbox"/> minimum wage <input type="checkbox"/> overtime <input type="checkbox"/> other provisions of Minnesota Statutes 177			
Legal basis for exemption:			
<input type="checkbox"/> Employee is non-exempt (entitled to overtime, minimum wage, other protections under Minn. Stat. 177)			
4. Rate: \$		Additional rates (if applicable):	
Paid by:		How applied:	
Hour <input type="checkbox"/>	Shift <input type="checkbox"/>	Day <input type="checkbox"/>	Week <input type="checkbox"/>
Salary <input type="checkbox"/>	Piece <input type="checkbox"/>	Commission <input type="checkbox"/>	Other method <input type="checkbox"/>
Overtime is owed after: _____ hours			
Allowances claimed:			
\$ _____	per meal for meal allowance (max = 60% of one hour of adult minimum wage per meal)		
\$ _____	per day for lodging allowance (max = 75% of one hour of adult minimum wage per day)		
	(or fair market value)		
5. Leave benefits available:			
<input type="checkbox"/> Sick leave <input type="checkbox"/> Paid vacation <input type="checkbox"/> Other paid time off			
How benefits are accrued: Number of hours _____ or days _____			
per <input type="checkbox"/> year <input type="checkbox"/> month <input type="checkbox"/> per pay period <input type="checkbox"/> per hours worked			
Terms of use:			
6. Deductions that may be made from employee's pay and amounts:			
7. Number of days in the pay period:		Regularly scheduled payday:	
Date employee will receive first payment of wages earned:			
8. Other information relevant to this position:			
I, the employee, have received a copy of this notice: <input type="checkbox"/> Yes <input type="checkbox"/> No			
Employer signature	Date	Employee signature	Date

This document contains important information about your employment. Check the box at left to receive this information in this language.

<input type="checkbox"/>	Spanish/Español	Este documento contiene información importante sobre su empleo. Marque la casilla a la izquierda para recibir esta información en este idioma.
<input type="checkbox"/>	Hmong/Hmoob	Daim ntawv no muaj cov xov tseem ceeb hais txog thaum koj ua hauj lwm. Khij lub npauv ntawm sab laug yog koj xav tau cov xov tseem ceeb no txhais ua lus Hmoob.
<input type="checkbox"/>	Vietnamese/Việt ngữ	Tài liệu này chứa thông tin quan trọng về việc làm của quý vị. Đánh dấu vào ô bên trái để nhận thông tin này bằng Việt ngữ.
<input type="checkbox"/>	Simp. Chinese/简体中文	本文件包含与您的雇用相关的重要信息。勾选左边的方框将接收以这种语言提供的信息。
<input type="checkbox"/>	Russian/русский	Данный документ содержит важную информацию о вашем трудоустройстве. Отметьте галочкой квадрат слева для получения этой информации на данном языке.
<input type="checkbox"/>	Somali/Soomaali	Dokumentigan waxaa ku qoran macluumaad muhiim ah oo ku saabsan shaqadaada. Calaamadi sanduuqan haddii aad rabto inaad macluumaadkan ku hesho luqaddan.
<input type="checkbox"/>	Laotian/ລາວ	ເອກະສານນີ້ມີຂໍ້ມູນທີ່ສໍາຄັນກ່ຽວກັບການຈ້າງງານຂອງທ່ານ. ກວດເບິ່ງກ່ອງທີ່ຢູ່ເບື້ອງຊ້າຍເພື່ອຮັບຂໍ້ມູນນີ້ໃນພາສານີ້.
<input type="checkbox"/>	Korean/한국어	이 문서에는 귀하의 고용 형태에 관련된 중요한 정보가 담겨있습니다. 이 언어로 이 정보를 받기를 원하시면 왼쪽 상자에 체크하여 주세요.
<input type="checkbox"/>	Tagalog/Tagalog	Ang dokumentong ito ay nagtataglay ng mahalagang impormasyon tungkol sa iyong pagtatrabaho. Lagyan ng tsek ang kahon sa kaliwa upang matanggap ang impormasyong ito sa wikang ito.
<input type="checkbox"/>	Oromo/Oromoo	Waraqaan kun waayee hojii keetii odeeffannoo barbaachisoo ta’an qabatee jira. Saaxinnii karaa bitaatti argamu kana irratti mallattoo godhi yoo afaan Kanaan barreeffama argachuu barbaadde.
<input type="checkbox"/>	Amharic/አማርኛ	ይህ ደብዳቤ ለአጠቃላይ በሚመለከት አስፈላጊ መረጃ የያዘ ነው። ይህንን ደብዳቤ በስተግራ በኩል ባለው ቋንቋ ተተርጉሞ ለንዲሰጡት ክፍሉን በዛው በስተግራ በኩል ባለው ሳጥን ውስጥ ምልክት ያድርጉ።
<input type="checkbox"/>	Karen / ကညီကျိာ်	လံာ်တီလံာ်မိတခါအံလံာ်ယုာ်တုာ်တုာ်ကရိုအကါဒိုလါအတုာ်ယးဒီးနတုာ်ပံးတုာ်မန့ဉ်လါ။ တီလါနိုဉ်တုာ်ဒါလါအတုာ်တကလါလါတုာ်ကဒီးန့ဉ်တုာ်တုာ်ကရိုလါကရိုဉ်တခါအံအကီတကုာ်။
<input type="checkbox"/>	Arabic/العربية	يحتوي هذا المستند على معلومات مهمة حول عملك. ضع علامة في المربع على اليمين للحصول على هذه اللغة. المعلومات في هذه اللغة.

Translation providers approved by the Minnesota Department of Administration

Betmar Languages, Inc.
6260 Hwy. 65 N.E., #308
Minneapolis, MN 55432
763-572-9711
best@betmar.com

Global Translation and Interpreter
913 E. Franklin Ave., #206
Minneapolis, MN 55404
612-722-1244
sandor@globaltranslations.com

Lingualinx Language Solutions, Inc.
433 River Street, #6001
Troy, NY 12180
518-388-9000
abartlett@lingualinx.com

The Bridge World Language Center, Inc.
110 Second Street S., #213
Waite Park, MN 56387
320-259-9239
mini@bridgelanguage.com

Latin American Translators Network, Inc.
1720 Peachtree Street N.W., #532
Atlanta, GA 30309
800-943-5286, ext. 8641, translations@latn.com
800-943-5286, ext. 8620, idenis@latn.com

Prisma International, Inc.
1128 Harmon Place, #310
Minneapolis, MN 55403
612-349-3111
jromano@prisma.com

Fox Translation Services
1152 Mae Street, #122
Hummelstown, PA 17033
866-369-1646 or 407-733-3720
dina@foxcasemanagement.com

Latitude Prime, LLC
80 S. Eighth Street, #900
Minneapolis, MN 55402
888-341-9080, ext. 501
elle@latitude.com

Swits, LTD
110 S. Third Street
Delavan, WI 53115
262-740-2590
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