

### 1. Employer Information

Name: Hamilton College

**Doing Business As (DBA)** Name(s): **Trustees of Hamilton College** 

FEIN (optional): 15-0532200

**Physical Address:** 198 College Hill Road Clinton, NY 13323

**Mailing Address:** Hamilton College 198 College Hill Road Clinton, NY 13323

Phone: (315) 859-4011

## 2. Notice given:

X At hiring

Before a change in pay rate(s), allowances claimed or payday

Notice and Acknowledgement of Pay Rate and Payday Under Section 195.1 of the New York State Labor Law **Notice for Hourly Rate Employees** 

3.	Emp	loyee's	Pay	Rate:
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per hour

4. Allowances taken:					
X None					
Tips	per hour				
Meals	per meal				
Lodging					
Other					
5. Regular payda	<b>av</b> : Fridav				

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6. Pay is:			
Weekly			
X Bi-Weekly			
Other			

# 7. Overtime Pay Rate:

per hour (This must be at least Ş 1½ times the worker's regular rate, with few exceptions.)

#### 8. Employee Acknowledgement:

On this day, I have been notified of my pay rate, overtime rate (if eligible), allowances, and designated pay day on the date given below. I told my employer what my primary language is.

## Check one:

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.

Print Employee Name

**Employee Signature** 

Date

Preparer's Name and Title

The employee must receive a signed copy of this form. The employer must keep the original for 6 years.

Please note: It is unlawful for an employee to be paid less than an employee of the opposite sex for equal work. Employers also may not prohibit employees from discussing wages with their coworkers.