Type company name here to auto-populate document

# [Company]

[Company]  
Company Address  
Telephone No: XXXXXXXXX  
Date: xx/xx/xxxx

##### CONFIDENTIAL

«Name»  
«Address1»  
«Address2»  
«Town» «Postcode»

Dear «Name»

### PRINCIPAL STATEMENT OF TERMS AND CONDITIONS

I am pleased to confirm your fixed-term appointment as «title of post» with [Company]. This document outlines the Terms and Conditions which apply to your contract and other information which is relevant to your employment.

(Time dependant contract) Subject to the terms and conditions outlined below, this contract will be for a fixed term commencing on [date] and terminating on [date], at which time it will automatically expire unless otherwise agreed in writing between you and [Company]. OR

(Task dependant contract) Subject to the terms and conditions outlined below, this contract will be for a fixed term commencing on [date] and continuing until the [task/project] is completed, at which time it will automatically expire unless otherwise agreed in writing between you and [Company]. The [task / project] in question involves [outline details of task / project] and is expected to last for X weeks/months/years, although [Company] cannot guarantee a minimum or maximum period of employment. In accepting this appointment, you agree that when the task / project is complete, your contract of employment will be automatically terminated. OR

(Cover for an absent employee) Subject to the terms and conditions outlined below, this contract will be for a fixed term commencing on [date] and continuing until [name or title of employee] returns to work after their period of [maternity leave/sickness absence/secondment] at which time it will automatically expire unless otherwise agreed in writing between you and [Company]. The organisation cannot confirm at this point in time exactly how long [name or title of employee]'s absence will last, but it is likely to be in the region of X [weeks/months]. The Company cannot guarantee you any minimum or maximum period of employment. It is a condition of this contract that you agree that when [name or title] returns to work, or should they not return, when a suitable replacement has been identified, this contract of employment will automatically terminate. OR

(Subject to funding) Subject to the terms and conditions outlined below, this contract will be for a fixed term commencing on [date] and continuing so long as funding is available to support the post in which you are employed. Because of the uncertainty of the availability of continued funding, [Company] cannot guarantee you any minimum or maximum period of employment. It is a condition of this contract that you agree that if funding for the post is withdrawn, your contract of employment will automatically terminate.

Your date of commencement of continuous service with [Company] or its subsidiaries is «xx/xx/xxxx».

Your base will be «base address», however the Company reserves the right, with appropriate consultation with you, to change your base should the needs of the Company require this.

Your working hours will be «hours» per week. The Company may require you to vary the pattern of your working hours if required on a temporary or permanent basis should the needs of the post require this. Overtime payments are made in line with the Company remuneration policy.

You will be paid at the rate of «£» per «hour / week / annum»; this will be reviewed annually.

If there is a reduction in work, the Company may temporarily lay you off without pay or reduce your working hours (short-time working) and your pay proportionately on giving as much notice as reasonably practical. Depending on the circumstances you may have a statutory right to a guarantee payment in accordance with legislation in force at the time.

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.

You will be paid «weekly / fortnightly / monthly» on «description of pay date – e.g. last working day of the month» in arrears to a bank account of your choice.

The [Company] leave year runs from the 1st January to the 31st of December. You are entitled to «number of leave days – needs to be a minimum of 28 days for someone working a 5 day week and pro rata for part-timers» inclusive of statutory holidays. Payment for holidays is made on the normal pay date as described above unless otherwise authorised by the Company. Your holiday pay will be calculated on the same basis as if you had been at work during that period.

Notwithstanding that this contract is for a fixed term, [Company] reserves the right to terminate your employment at any time prior to the expiry of the fixed term defined above by giving you the statutory minimum amount of notice. This could occur for any business reason that the organisation deems appropriate. You are obliged to give the Company «notice – usually 1,4 or 8» weeks notice to terminate this contract of employment.

This post is subject to the completion of a «number of month’s probation – usually 3 or 6» month probationary period. At the end of this period if your performance is of a satisfactory standard your fixed-term appointment will be confirmed. During this period, one weeks notice may be given by either party to terminate this contract.

You may be automatically enrolled into the Company Pension Scheme (details are available from the Head Office) depending on your level of earnings; however you may also choose to opt out of this. Should you opt to take out a Personal Pension Plan then this is a private matter between yourself and the financial institution concerned, and does not involve the Company in any way.

You are expected to comply with the [Company] dress code, your line manager will explain the details of this, and provide you with any relevant Company policy on this.

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.

If you have a grievance in relation to your employment, then you should follow the procedure outlined in the Company policy and procedure on Grievances. You should initially discuss any grievance with your immediate superior.

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.

Smoking in [Company] premises is prohibited (except in those external areas specifically designated for that purpose). Breach of this regulation may result in disciplinary action being taken.

During the course of your employment you may find yourself in possession of confidential, sensitive or personal information either in relation to the company, it’s customers or employees. It is a condition of your employment and a requirement of the General Data Protection Regulation that you have a duty of confidentiality and a requirement to safeguard such information. You must not discuss or make available any such information whatsoever to any outside individual or organisation including the media. Any breach of this requirement will be considered as serious misconduct and could lead to disciplinary action including dismissal.

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.

It is a condition of your employment that the company is satisfied on your medical fitness to carry out your duties. Should it be deemed necessary during the course of your employment, you may be asked to request a medical report from your doctor, or attend for a medical examination from an external Occupational Health Service. This will be for the purposes of assessing your physical or mental fitness to undertake your job and to advise on any reasonable adjustments necessary to support you should that be necessary.

If your employment with the Company is dependent upon the possession of particular qualifications or registration with a statutory Body or other Authority; evidence of this must be produced on request. Failure to produce such evidence may lead to the termination of your employment.

You will be subject to the terms and conditions as agreed and amended from time to time by [Company] as outlined in its policies, procedures, handbooks and other relevant documents. Access to these documents is available through your line manager or Company Head Office, and copies can be provided on request.

If you are in agreement with the above terms and conditions please sign both copies of this statement, retain one and return the other to me.

Yours sincerely,

XXXXX XXXXXX

**Designation  
For** [Company]

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

Restrictive Covenant  
On leaving the company, I agree not to undertake provision of the same services / products as supplied by [Company] either from my own business, or the employment of a competitor to the Company, for a period of two years, unless this is specifically agreed by [Company]. The Company will only enforce that which is reasonable to protect it's business.

(green print = optional statement)

SIGNATURE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_