

Serving individuals with developmental disabilities

UNIFORM DISTRIBUTION AGREEMNT

Employee's Name_____

Employee's Supervisor _____

Date Uniforms Issued_____

By signing below I acknowledge that I have received <u>three</u> (3) uniform shirts for my position with vocational services at Center for Social Change, Inc. I acknowledge that he uniforms are property of the Company and I will be required to wear one of these uniform shirts each work day and failure to do so will result in disciplinary action up to and including termination as this is considered insubordination. I will also be asked to go home to change into my uniform shirt and return at my own expense.

It is also my understanding that to account for normal wear and tear the Company will exchange uniform shirts as needed at no cost to the employee.

It is my responsibility to keep these uniform shirts in good condition to remain professional during my working hours. The cost to replace damaged or destroyed shirts is \$25 each and if I need replacement the Company has the right to deduct wages for that cost.

In the event that I am not employed with the Company for at least 90 days the Company has the right to deduct from my last paycheck a uniform set up fee of \$75.

Signature of employee:	Date:	/	/	
Signature of employee's supervisor:	Date:	/	/	

Revised 7/1/2016