

**WORKING TIME REGULATIONS
WAIVER OPT OUT AGREEMENT**

IF YOU CHOOSE NOT TO SIGN THIS DOCUMENT, YOU ARE RESTRICTING YOUR HOURS AVAILABLE TO WORK NO MORE THAN 48 HOURS IN ANY ONE WEEK PERIOD.

IF YOU CHOOSE TO SIGN THIS DECLARATION, CORNERSTONE STAFFING SOLUTIONS LTD., WILL NOT HOLD YOU TO WORKING MORE THAN 48 HOURS PER WEEK IT IS YOUR CHOICE AND AT YOUR PERSONAL DISCRETION IF YOU CHOOSE TO WORK MORE OR LESS THAN 48 HOURS

I _____ AGREE THAT I MAY WORK FOR MORE THAN AN AVERAGE OF 48 HOURS PER WEEK

IF I CHOOSE TO CHANGE THIS AGREEMENT, I WILL GIVE CORNERSTONE STAFFING SOLUTIONS LTD. ONE MONTH NOTICE IN WRITING TO END THIS AGREEMENT

PRINT NAME _____ SIGN _____

DATE _____

STUDENT DECLARATION FORM

STRICTLY CONFIDENTIAL

UK STUDENTS: PLEASE COMPLETE SECTION A, C AND D

OVERSEAS STUDENTS: PLEASE COMPLETE SECTIONS A, B AND D

SECTION A: ALL STUDENTS

I AM A UK/ OVERSEAS (DELETE AS APPROPRIATE) STUDENT CURRENTLY STUDYING

COURSE _____

AT _____

SECTION B: OVERSEAS STUDENTS

MY PERMIT ALLOWS ME TO WORK NO MORE THAN _____ HOURS PER WEEK

SECTION C: UK STUDENTS

PLEASE COMPLETE ALL RELEVANT STATEMENTS

I AM ALLOWED TO WORK NO MORE THAN _____ HOURS PER WEEK SIGNATURE _____

I AM ALLOWED TO WORK OUTSIDE TERM TIME ONLY SIGNATURE _____

I HAVE NO RESTRICTION ON MY WORKING HOURS/TIMES SIGNATURE _____

SECTION D: ALL STUDENTS

DECLARATION: I CONFIRM THAT THE INFORMATION I HAVE PROVIDED IS CORRECT. ANY MISLEADING OR INACCURATE INFORMATION GIVEN MAY RESULT IN CORNERSTONE STAFFING SOLUTIONS LTD. TERMINATING MY EMPLOYMENT.

PRINT NAME: _____

SIGNATURE:

DATE
