

雇 用 条 件 書

WRITTEN EMPLOYMENT CONDITIONS

12/ 12/ 2001

To: Aaaa

Name of the organization of affiliation of the specified skilled worker: ABC 会社

Address: sdfsdf

Tel. no.: 0567-52-2736

Representative's name and title: tanakaa *Seal*

I . Period of the employment contract

1. Period of the employment contract

(From: (/) to (/) Scheduled date of entry: / /)

2. Renewal of contract

The contract shall be automatically renewed

The contract may be renewed

The contract is not renewable

* If the contract may be renewed, the renewal of the contract shall be determined by the following criteria.

Volume of work to be done at the time the term of contract expires

Employee's work record and work attitude

Employee's capability to execute their tasks

Business performance of the company

State of progress of the work done by the employee

Other ()

3. Limit on contract renewal (No / Yes (Up to _____ times / Total contract period of up to _____ years))

[If the employee has executed a fixed-term employment contract with the same employer under the Labor Contracts Act, and the total contract period exceeds five years]

By requesting the employer to execute an employment contract with no fixed term (a non-fixed term employment contract) during the term of the fixed term employment contract, the employee may change his/her employment contract to a non-fixed term employment contract with effect from the day following the last day of the fixed term employment contract (/ /). If this applies, will the working conditions in the non-fixed term employment contract be changed from those in the fixed-term employment contract? (No / Yes (as described in Attachment 2))

II . Place of employment

Direct employment (fill in below)

* State the office of the accepting organization.

Name of office _____

Address _____

Contact information _____

Dispatch employment (fill in the separate "Employment Conditions Statement")

(Extent of change) No possibility of change (If there is a possibility of change, provide details below.)

Name of office _____

Address _____

Contact information _____

III . Contents of work to be engaged in:

(Extent of change) No possibility of change (If there is a possibility of change, provide details below.)

1. Field ()

2. Work category ()

1. Field ()

2. Work category ()

IV . Working hours, etc.

1 . Start and finish times

(1) Start time: (:) Finish time: (:) (Number of prescribed working hours in one day: () hours () minutes

(2) 【If the following systems apply to the worker】

Irregular labor system : irregular labor system unit ()

* If an irregular labor system is adopted, attach a copy of the yearly calendar in a language the specified skilled worker can fully understand, and a copy of the agreement on the irregular labor system submitted to the Labor Standards Inspection Office.

Work shift system using a combination of the following working hours

Start time (:) Finishing time (:); Day applied (); prescribed working hours for one day () hours () mins

Start time (:) Finishing time (:); Day applied (); prescribed working hours for one day () hours () mins

Start time (:) Finishing time (:); Day applied (); prescribed working hours for one day () hours () mins

2. Break time (minutes)

3. No. of prescribed working hours ① Week () hours () mins ② Month () hours () mins ③ Year () hours () mins

4. No. of prescribed working days ① Week () days ② Month () days ③ Year () days

5. Overtime work ☐ Yes ☐ No

☐ Details are stipulated in Article (), Article () and Article () of the Rules of Employment.

V . Days off

1. Regular days off: Every (), national holidays, others () (total number of annual days off: () days

2. Additional days off: () days per week/month, others ()

☐ Details are stipulated in Article (), Article () of the Rules of Employment.

VI . Leave

1. Annual paid leave Those working continuously for six months or more → () days

Those working continuously for up to six months (☐ Yes ☐ No) → After a lapse of () months and () days

2. Other leave Paid (☐) Unpaid (☐)

3. Leave for temporary return home: If the specified skilled worker wishes to return home temporarily, he or she must be given necessary days off within the scope of the abovementioned 1 and 2.

☐ Details are stipulated in Article (), Article () of the Rules of Employment.

VII . Wages

1. Basic pay ☐ Monthly wage (yen) ☐ Daily wage (yen) ☐ Hourly wage (yen)

* Details given in the attachment.

2. Various allowances (excluding additional pay rate for overtime)

(allowance , allowance , allowance)

* Details given in the attachment.

3. Additional pay rate for overtime, holiday work or night work

(1) Overtime work: Legal overtime 60 hours or less a month () %

<p>Legal overtime over 60 hours a month () %</p> <p>Fixed overtime () %</p> <p>(2) Holiday work Legal holiday work () % , Non-legal holiday work () %</p> <p>(3) Night work () %</p> <p>4. Closing day of payroll <input type="checkbox"/> () of every month; () of every month</p> <p>5. Pay day <input type="checkbox"/> () of every month; () of every month</p> <p>6. Method of wage payment <input type="checkbox"/> Bank transfer <input type="checkbox"/> Payment in yen (cash)</p> <p>7. Deduction from wages in accordance with labor-management agreement <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p style="padding-left: 20px;">* Details given in the attachment.</p> <p>8. Wage raise <input type="checkbox"/> Yes (Timing , amount, etc.) <input type="checkbox"/> No</p> <p>9. Bonus <input type="checkbox"/> Yes (Timing amount, etc.) <input type="checkbox"/> No</p> <p>10 . Retirement allowance <input type="checkbox"/> Yes (Timing, amount, etc.) <input type="checkbox"/> No</p> <p>11. Leave allowance <input type="checkbox"/> Yes (rate)</p>	<p>VIII . Items concerning retirement</p> <p>1. Procedure for retirement for personal reasons (Notification should be made to the president or the factory foreman, etc. no less than () days before retirement)</p> <p>2. Reasons and procedure for the dismissal</p> <p style="padding-left: 20px;">In cases of dismissal, the specified skilled worker shall be dismissed through being given 30 days' advance notice or at least 30 days of the average wage only when there are unavoidable reasons for the dismissal. In cases of dismissal based on a cause attributable to the fault of the specified skilled worker, there is the possibility of immediate dismissal without giving advance notice or the average wage being paid on approval being obtained from the Director of the Labor Standards Office Concerned.</p> <p style="text-align: right;">Details are stipulated in Article (), Article () of the Rules of Employment.</p>
<p>IX . Others</p> <p>1 . Joining social insurance / employment insurance (<input type="checkbox"/> Employees' pension insurance , <input type="checkbox"/> Health insurance , <input type="checkbox"/> Employment insurance</p> <p style="padding-left: 20px;"><input type="checkbox"/> Industrial accident insurance <input type="checkbox"/> National pension)</p> <p style="padding-left: 20px;"><input type="checkbox"/> National health insurance <input type="checkbox"/> Others ()</p> <p>2 . Health check at the time of hiring: Month () Year ()</p> <p>3 . First regular health check: Month () Year () (every () afterwards)</p> <p>4. Point of contact for matters concerning the improvement of employment management etc.</p> <p style="padding-left: 20px;">Name of department Name of person in charge (Contact information)</p> <p>5 . If the specified skilled worker is unable to pay for the travel expenses to return to his or her home country after the termination of this contract, the organization shall pay for the travel expenses and take necessary measures to ensure smooth departure.</p>	
<p>Recipient (signature)</p>	
<p>Any other matters shall be governed by the company's Rules of Employment. Place and method of checking the Rules of Employment ()</p>	

賃 金 の 支 払 PAYMENT OF WAGES

1 . Basic Wages

☐ Monthly wage (yen) ☐ Daily wage (yen) ☐ Hourly wage (yen)

* Amount per hour in cases of monthly or daily wages (yen)

* Amount per month in cases of daily or hourly wages (yen)

2 . Amount and calculation method etc. for various allowances (excluding the additional pay rate for overtime)

(a) (allowance yen; Calculation method)

(b) (allowance yen; Calculation method)

(c) (allowanceyen;Calculation method)

(d) (allowanceyen; Calculation method)

[If the worker is entitled to fixed overtime pay]

(e) (allowance yen

- Requirement for payment: An overtime allowance for __ hours will be given regardless of whether the worker did overtime. The additional pay rate for overtime will be given for overtime exceeding _____ hours.)

3 . Estimated payment per month (1+2) approx. _____yen (total)

4 . Items to be deducted when paying wages

(a) Tax (approx. yen)

(b) Social insurance (approx. yen)

(c) Employment insurance (approx. yen)

(d) Food (approx. yen)

(e) Housing (approx. yen)

(f) Others (utility costs) (approx. yen)

(approx. yen)

(approx. yen)

(approx. yen)

(approx. yen)

(approx. yen)

Amount to be deducted approx. yen (total)

5 . Take-home pay (3 - 4) approx. yen (total)

* Provided there is no absence from work, etc. and excluding additional pay, etc. for overtime work.