



# Temporary Employment Acknowledgment Form

<b>HR Liaison:</b> Please check a subgroup that applies to your temporary employee.	<b>Temporary Employee Subgroup</b>	<b>Must contribute in the Texas County and District Retirement System (TCDRS)</b>	<b>Eligible for Health, Dental &amp; Vision</b>
<input type="checkbox"/>	<b>Hourly - No Benefits</b> Temporary employee working less than 6 months.	No	No
<input type="checkbox"/>	<b>Hourly – Retirement</b> Temporary employee working more than 6 months and expected to work less than an average of 30 hours per week.	Yes	No
<input type="checkbox"/>	<b>Hourly - Retirement and Benefits</b> Temporary employee working more than 6 months and expected to work an average of 30 or more hours per week.	Yes	Yes
<input type="checkbox"/>	<b>Seasonal - No Benefits</b> Temporary employee hired into a position for which the customary annual employment is 6 months or less and performs services exclusively at certain seasons or periods of the year.	No	No

Based on the temporary employee subgroup checked above, I may need to contribute to retirement and may be eligible for health, dental and vision benefits.

I understand that I am NOT eligible for the following benefits. However, I am eligible for worker's compensation benefit.

- |   |  |
|---|--|
| <ul style="list-style-type: none"> <li>- Emergency Leave with Pay</li> <li>- Military Leave with Pay</li> <li>- Sick Leave</li> <li>- Paid Vacation Leave</li> <li>- Paid Family Medical Leave</li> <li>- Paid Personal Holidays</li> </ul> | <ul style="list-style-type: none"> <li>- Paid Holidays</li> <li>- Leave with Pay</li> <li>- Life Insurance</li> <li>- Performance-Based Pay</li> <li>- Longevity or Certification Pay</li> </ul> |
|---|--|

I acknowledge that I am an employee-at-will as defined per Travis County Policy, 109.004. Also, I understand that I do not have an employment contract or otherwise, and that I am not guaranteed future employment, unless it is agreed upon in an individual contract.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Employee Name