WE ARE YOUR DOL



Notice and Acknowledgement of Pay Rate and Payday Under Section 195.1 of the New York State Labor Law **Notice for Hourly Rate Employees**

1. Employer Information	3. Employee's rate of pay:	On this day I have
Name:	\$ per hour	rate, overtime rate and designated p
Kingsborough Community College	4. Allowances taken: ☐ None	below. I told my olanguage is.
Doing Business As (DBA) Name(s):	☐ Tips per hour ☐ Meals per meal	Check one:
	☐ Lodging ☐Other	English because ☐ My primary lar
FEIN (optional): 13-1616880	5. Regular payday:	have been given only, because the
Physical Address: 2001 Oriental Boulevard.	6. Pay is:	does not yet offer primary language
Brooklyn, NY 11235	☐ Weekly ☑ Bi-weekly	Print Employee N
Mailing Address: Same as above	☐ Other	T Time Employee Te
	7. Overtime Pay Rate: \$\frac{\mathbb{N}/\text{A}}{2}\$ per hour (This must be at least 1\frac{1}{2}\$ times the worker's regular rate with	Employee Signat
Phone: (718) 368-5651	few exceptions.)	Date
2. Notice given:		Preparer's Name
X At hiring☐ Before a change in pay rate(s), allowances claimed or payday		The employee m copy of this form keep the origina

8. Employee Acknowledgement:

e been notified of my pay te (if eligible), allowances, pay day on the date given employer what my primary

☐ I have been given this pay notice in English because it is my primary language.
My primary language is I have been given this pay notice in English only, because the Department of Labor does not yet offer a pay notice form in my primary language.
Print Employee Name
Employee Signature
Date

and Title

ust receive a signed m. The employer must al for 6 years.

Please note: It is unlawful for an employee to be paid less than an employee of the opposite sex for equal work. Employers also may not prohibit employees from discussing wages with their co-workers.