Meal Period Waiver

Employee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I acknowledge that my employer has made available to me a lunch period each day when my shift exceeds 5 hours. My employer does this by scheduling a time during the day in which I may take advantage of 30-minutes to eat a meal or take a break.

While this is made available to me, I hereby request to voluntarily waive my right to a meal period. I wish to regularly work straight through without a lunch break even though my employer has made it available to me. Therefore, when I choose to not take my break, it is because I have waived the right to take one and will not hold my employer responsible for that choice.

I further understand that:

* I will not be asked to clock out unless I intend to take a duty-free lunch break that lasts at least 30-minutes.
* I will be paid for all hours worked, including overtime if applicable.
* In order for this waiver to be valid, the employer/manager must authorize the waiver in writing by signing below.
* I may revoke this agreement to waive my meal period at any time. I must notify my employer immediately and will then be asked to sign the Revocation Notification below.
* If I have concerns about this arrangement, wish to make changes, or if there is anything else that I need to discuss as it relates to this, I must immediately speak with my manager so that it can be rectified as soon as possible.

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

Employer/Manager Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**For Employee - Revocation Notification:**

I hereby revoke the above requested and approved meal period waiver.

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