Note: The Model Employment Contract should be under the Company Letter Head

STAMP+SIGNATURE IN ALL PAGES

Specimen Employment Contract

The Employment Contract is made and entered into on this day
Bangladesh a license recruiting agency which shall be joint and severally responsible for compliance herewith.
Employee
A. Employer: 1. Name: 2. Address:

- 3. Tel & Fax No:
- 4. E-Mail Ad:
- 5. Country (Registered country of investment):
- 6. Business Type:
- 7. Registration no:

B. Employee:

- 1. Name:
- 2. Permanent Address:
- 3. Current Address:
- 4. Passport No:
- 5. Nationality:
- 6. Date of Birth:
- 7. Emergency Contact:

C. Details of the Employment (Basic Terms):

- 1. Positions and Job Title:
- 2. Monthly Basic pay:
- 3. Employment Approval No:
- 4. Issued & Expiry Date:
- 5. Site of Employment:
- 6. Commencing Date:
- 7. Duration of Contract:
- 8. Work Status (Temporary or Permanent):
- 9. No. of Working hours per week:

D. The Employer Shall Provide the Employee:

- 1. Free Air Ticket to Dhaka/ Male' at the beginning of the contract.
- 2. Free Return Air Ticket to Dhaka in the following cases:
 - a) Expiration of contract
 - b) Termination of Contract by the employer without just causes
 - c) If employee is unable to continue work due to work related diseases or injury
 - d) Force Majeure; and
 - e) In such other cases when contract is terminated through no fault of employee.
- 3. Free Food or Food Allowances of US\$per month. (In case of unskilled worker food will be provided by the Employer).
- 4. Free accommodation with living facilities/ allowances in lieu of accommodation of US\$per month (In case of unskilled worker accommodation will be provided by the Employer).
- 5. Free Emergency Medical Attention and Medicines from the approved hospitals and clinics.
- 6. Sick leave ofdays.
- 7. Tax, fees and fines regarding the Work Visa Card and resident permit.
- 8. 30 days paid 'Annual Leave' after successful completion of 12 months.
- 9. Workmen's compensation Benefit for service connected illness, injury, death, according to laws of the Republic of Maldives and war hazard protection.
- 10. Company benefits provided to other Employees in same work.
- E. Salary and allowances, if any, shall be paid in duly converted currency at the prevailing official rate of exchange before the 7th day of every month and a signature will be obtained from the Employee.
- F. Employee will be required to work for an aggregate of 48 working hours per week. Employee is entitled for overtime pay, if the employee works more than 48 hours per week.
- G. Absence from work shall only be accepted on the basis of a medical certificate issued by a Medical Practitioner authorized by the Ministry of Health.
- H. The Employer shall assist the Employee in the regular remittance of his monthly salary and allowances or any portion of them, as the employee may decide, to his/ her beneficiaries in Bangladesh.

I. <u>Compensations:</u>

- 1. The employer shall ensure that the personal life and accident insurance for the employee to be provided for work related illness, injuries or death in accordance with the pertinent laws of the Republic of Maldives.
- 2. During the course of the employment, any accident or sudden death occurred to the employee, the employer is responsible to pay reasonable compensation when legal system is silent or not in active in the country where the employee is working.

J. In the Case of Death:

In case of death of the employee, the employer shall repatriate the remaining of the deceased along with the personal effects and savings on the expenses of the employer, and with the payment of compensation.

K. Termination of Contract:

During the term of Employment either party may terminate the contract with:

- 1. Two weeks written notice, if the Employment is for a period more than six months but less than one year.
- 2. One month's written notice, if the Employment is for a period not less than one year but not more than five years.
- 3. Two months written notice if the Employment period is more than five years.
- L. Employee shall at all times confirm to obey, respect and not violate the laws and regulations, religion and customs of the Republic of Maldives.
- M. Employee shall not engage in any activity of work either with or without remuneration for the benefit of any third party without prior any approval of the Employer.
- N. Passport of the Employee shall not be retained by the employer.
- O. Work Permit card should be renewed in time.
- P. Salary of the Employee will be paid in his salary account in every month US\$.
- Q. All disputes arising from the employment contact shall initially be settled amicably through negotiations.
- R. This contract is governed by and subject to the Laws and Regulations of the Republic of Maldives and the Courts of Law of the Republic of Maldives shall have exclusive jurisdiction in respect of all claims and disputes arising from or in relation to this contract.
- S. Harassment based on sex, race, age, disability, national origin, religion or any other criteria is contrary to the philosophy and principles of the Employer and will not be tolerated and condoned.

At all times the Employer will abide by the procedural fairness under the current Employment Legislation when dealing with dismissals from the Employment.

We, the undersigned have studied the terms and conditions of Employment and have endorsed with our signatures to abide by the terms and conditions of this contract on the......

EMPLOYER	EMPLOYEE
Name:	Name:
Designation:	Passport no.
Date:	Date:
Stamp:	

Note: The Model Letter of Appointment should be under the Company Letter Head

	LETTER OF APPOINTMENT
Dotoi	ils of the Employer / Company:
1.	
2.	Address:
	Tel & Fax No:
	E-Mail Ad:
5.	
	Business Type:
	Registration no:
Detai	ils of the Employee:
	Name:
2.	Permanent Address:
3.	Current Address:
4.	Passport No:
5.	Nationality:
6.	Date of Birth:
7.	Emergency Contact:
Details	s of the Employment (Basic Terms):
1	. Positions and Job Title:
2	. Monthly Basic pay:
3	
4	. Issued & Expiry Date:
5	
6	. Commencing Date:
7	. Duration of Contract:
8	. Work Status (Temporary or Permanent):

Details of Signee:
Signature of Company/ Employer:
Name:
Designation:
Date:
Stamp:

9. No. of Working hours per week: