On-Call Healthcare Worker Employment Template

Employee Information			
Full Name			
Address			
Dhana Niwahar			
Phone Number			
Email			
Employment Details			
Position			
Department			
Start Date			
Supervisor			
Caparvical			
Availability & Shifts Availability Shift Type Hourly Rate			
Terms & Conditions			
☐ I agree to the terms and conditions stated above			
Signatures			
Employee Signature			

Date	
Employer Signature	
Date	