



| Client Information        |   |
|---------------------------|---|
| School Name:              | Queen Ethelburga's Collegiate                   |
| School Address:           | Queen Ethelburga's Collegiate , YO26 9SS,London |
| Point of contact:         |   |
| Email address of contact: |   |

| Confirmation of Agreement                                  |             |
|--|-------------|
| Name of Worker:  |             |
| Job Title:   | testing18   |
| Start of Assignment:                                       | 19.Mar.2024 |
| End of Assignment:   | 26.Mar.2024 |
| Specific hours/days/time keeping requirements              |             |
| Notice period for temporary Worker to terminate assignment |             |
| Take home pay  |             |
| Payment Frequency  |             |

| Temporary Worker's Services Information |  |
|---|--|
| Temporary Worker Signature:             |  |
| Print Name:                             |  |
| Date:                                   |  |
| Employment Business Signature           |  |

|                 |                    |
|-----------------|--------------------|
| Print Name      | <b>Admin Admin</b> |
| Signature Date: | <b>2024-03-18</b>  |