

CASUAL/SEASONAL EMPLOYMENT STATEMENT

Employing agency to complete the form on behalf of employee and have employee review the statute, sign and date the form at time of hire.

I, _____, have accepted a position as a casual/seasonal employee with _____(identify employing agency), State of Delaware. My duties will include, but are not limited, to _____. My assignment commences on _____.

I have read and understand the limits on such employment status and the limits of the State of Delaware's ability to retain me as a casual/seasonal employee as set forth at 29 *Del. C.* § 5903(17)a. (see attached Exhibit A).

I understand that casual/seasonal employment is offered to assist agencies on a temporary basis only.

I understand that I will work in my capacity as a casual/seasonal employee less than 30 hours per week, or less than 130 hours per month, on average over the course of a fiscal year (July 1 to June 30).

I understand that the duration of casual/seasonal employment will be determined by the needs of the agency, available funds, and my performance.

Nothing in this document is intended to, nor shall it be interpreted to create, any right or entitlement to employment with the State of Delaware or any State of Delaware agency.

This Statement and my signature below demonstrate that I have been offered an opportunity to discuss my casual/seasonal employment status and that I understand that status.

I have read and fully understand each of the statements regarding my employment status as a casual/seasonal employee with the State of Delaware _____ (identify employing agency). I have signed this certification freely and voluntarily. I understand that a copy of this form will be retained by my employing agency.

**Casual/Seasonal Employee
Signature**

Printed Name

Date

Employing Agency Designee

Printed Name

Date

Witness Signature

Printed Name

Date