

1. Employer Information	
Name: Hamilton College	
Doing Business As (DBA) Name(s): Trustees of Hamilton College	
FEIN (optional): 15-0532200	
Physical Address: 198 College Hill Road Clinton, NY 13323	
Mailing Address: Hamilton College 198 College Hill Road Clinton, NY 13323	
Phone: (315) 859-4011	
2. Notice given:	

Before a change in pay rate(s), allowances claimed or payday

Notice and Acknowledgement of Pay Rate and Payday Under Section 195.1 of the New York State Labor Law Notice for Hourly Rate Employees

3. Employee's Pay Rate:		8. Employee Acknowledgement:
\$	per hour	On this day, I have been notified of my pay rate, overtime rate (if eligible), allowances, and designated pay day on the date given below. I
4. Allowances taken:		told my employer what my primary language is.
X None		Check one:
Tips	per hour	I have been given this pay notice in English
Meals	per meal	because it is my primary language.
Lodging _		_
Other		My primary language is I
		have been given this pay notice in English only,
5. Regular payday: Friday		because the Department of Labor does not yet
		offer a pay notice form in my primary language.
6. Pay is:		
X Weekly		Print Employee Name
L Bi-Weekly		
Other		
		Employee Signature
7. Overtime P	ay Rate:	
\$	per hour (This must be at	Date
least 1½ times the worker's regular rate, with		Michael Thouas Employment Managas
few exceptions.)		Michael Thayer, Employment Manager Preparer Name and Title
		Preparer Name and Title
		The employee must receive a signed copy of this form. The employer must keep the original for 6 years