Meal Period Waiver Agreement Form – California

I understand that I am entitled to an unpaid 30-minute meal period whenever I work more than 5 hours in a workday. However, I understand and agree that the nature of my work prevents me from being relieved of all duties during my meal period and that, with the consent of Precision Swiss Products; I will work an on-the-job meal period that will be paid for by Precision Swiss Products. I understand that I freely and voluntarily agree to this meal waiver and that I may revoke this at any time. To revoke, I must notify Precision Swiss Products in writing that I have decided to revoke this agreement.

Employee Printed Name: _____

Employee Signature: _____

Date: _____

HR Representative: _____

HR Representative Signature: _____

Date: _____