

**Working Out Unit**

**Burren House**

**EMPLOYMENT AGREEMENT**

Company: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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I understand that I am employing serving prisoner/prisoners whose conviction(s) are not spent and are risk assessed as suitable for a programme of pre-release that includes a community based work placement and agree to the following:

* I am not responsible to manage the prisoner’s compliance with his temporary release conditions.
* I will advise the Working Out Unit immediately if I become aware of any unexplained absence from his place of work. Tel No: 02890758301.
* I am aware that Working Out Unit staff will telephone on a daily basis and visit the work place at regular intervals to check the prisoners attendance.
* I have public liability insurance cover and will be willing to provide a copy if requested.
* I understand my obligations in regards to confidentiality of the prisoner’s conviction information compliant with The Data Protection Act 1998.
* I comply with the requirements of the [Health and Safety at Work (NI) Order 1978](http://www.dhsspsni.gov.uk/gmgr-annexe-c25) and will take all steps necessary to ensure the health, safety and welfare of any prisoner’s employed with me.

For employers paying wages to prisoners:

* I have provided the employee with a contract of employment.
* My company will exercise all employment rights as governed by current employment laws.
* I will ensure that Tax and National Insurance contributions are paid and payslips will be provided to that effect.

Employers Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Position:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Working Out Unit Officer Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_