



Employment Agreement With **Dental Express Staffing, LLC**

This agreement, entered into on _____ between Dental Express and _____, defines and sets forth the terms and conditions of employment as follows:

1. **Position/Employment Period**

- a. Dental Express retains the Employee for temporary placement to perform duties consistent with the position of dental assistant, dental hygienist, or administration and agrees to do so for the period beginning on the date above and ending on the date which the Employee's employment is terminated in accordance with paragraph 5 below.
- b. Employee understands that Dental Express may frequently require work at different placement sites.
- c. Employee understands that Dental Express cannot guarantee hours at any time throughout employment period.

2. **Performance of duties**

- a. The Employee agrees to devote all business time to the business affairs of Dental Express and shall perform all duties faithfully and efficiently under the direction of Dental Express as well as any supervisor at the placement site. The Employee shall not be assigned duties/responsibilities that are not within the scope of their position.
- b. The Employee agrees to **arrive at job site on time** based on the hours specified or needed at the time of placement.
- c. The Employee agrees to bring any concerns or complaints directly to Dental Express regarding Client's working environment (including lack of safeguards or OSHA compliance), work-related injuries, and /or job duties. Employee and/or Client will provide DES a First Report of Injury for any work-related injury within 24 hours.
- d. The Employee is responsible for staying up to date with CPR certification and is expected to give a copy of CPR card prior to hire.
- e. The Employee is expected to maintain OSHA compliance throughout the duration of employment.
- f. **You are required to provide doctors' excuses or proof of reason for cancellations or failures.** Please email these to staff@dentalexpressstaffing.com.
- g. **The Employee understands that chronic issues, including repeated tardiness, repeated failure to show up to work, and repeated negative reviews that have been addressed, will result in a decrease of your hourly rate moving forward. This rate will never go below minimum wage. We will conduct an Employee Improvement Plan to help with progress and quality of our employees. See Expectations paperwork.**

3. **Compensation**

- a. Employee shall receive an hourly wage, payable every Friday in the amount of \$ _____ per hour, subject to increase or decrease based on merit as determined by Dental Express. All payments will be direct deposited into the checking or savings account of your choice and the Direct Deposit ACH form is expected prior to receiving payment. All paycheck stubs will be emailed and will require a password for viewing. **The password will be the first 4 letters of your last name along with the last 4 numbers of your social security.** All personal payroll information will be given to the accountant for Dental Express.
- b. Employee shall be covered under Dental Express's worker's compensation, as well as general and professional liability during the period of time of temporary placement.
- c. It is recommended that anyone holding a license be responsible for their own professional liability insurance, although clients sign an agreement to cover liability as well.
- d. Employees are responsible for their own attire (scrubs or dress attire) based on Client's expectations and needs. As a representative of Dental Express, it is requested that Employee's scrubs are clean and pressed, shoes are clean, nails are clean and trimmed, and hair is pulled away from Employee's face during working hours.

4. **Confidentiality**

- a. During and after the period of employment, the Employee will not reveal any confidential information, or knowledge pertaining to Dental Express to businesses in competition with Dental Express including, but not limited to pay rates and sensitive information. This duty of confidentiality shall extend to any information to which the Employee

may have had access to at temporary job sites including, but not limited to, patient information (medical or otherwise) and financial information. The Employee will comply with all HIPAA regulations and guidelines.

5. Termination

a. If at any time the Employee violates the agreements set forth above, Dental Express shall have the right to terminate the Employee and shall have access to any remedy available at law or equity to compensate for such violation.

b. **Employee agrees to provide Dental Express with written notice of intended termination at least two weeks in advance of intended termination.** We require a 2 week notice in order to have time to replace you for our clients.

6. Consent to Finder's Fee

a. In the event, within eighteen months of the termination of this agreement or within eighteen months of the last day of work as a Dental Express employee, one of Dental Express's clients or corporate office affiliate who utilized the services, hires the Employee or refers Employee to another company or employment agency, the Employee consents to that client paying a placement fee due to expenses that Dental Express incurs in recruiting, screening, and/or training.

7. Amendment

a. This Agreement may be amended or cancelled by mutual agreement of the parties without consent of any other person.

8. Successors

b. This Agreement shall be binding upon Dental Express and its successors until any person acquires all Dental Express's assets and business, whether by merger, consolidation, purchase or otherwise.

9. Applicable Law

c. The provisions of this Agreement shall be construed in accordance with the laws of the State of Wisconsin.

10. Counterparts

d. The Agreement may be executed in two or more counterparts, any of which shall be deemed the original without references to the others.

The Employee agrees and Dental Express has caused the above to be executed in its name as of the day and year written above.

Employee Name: _____

Address: _____

Phone: _____

Email: _____

Employee Signature: _____ Date: _____

Dental Express Staffing, LLC

By: _____

Erinn Brandau



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