[Date]

[Candidate Name]

[Street Address]

[City, State Zip code]

Dear [Candidate Name],

We are pleased to offer you the position of \_\_\_\_\_\_\_\_ at [Company Name] reporting to [Name, title].

This position offers a biweekly salary of $\_\_\_\_\_, which is the equivalent of $\_\_\_\_ on an annual basis.  This position is considered exempt under the federal and state wage and hour laws, which means you are not eligible for overtime pay beyond your salary.

[OR]

This position offers an hourly rate of $\_\_.\_\_, which is paid on a weekly basis. This position will be considered a nonexempt position, which means that you will be eligible for overtime time pay for hours worked in excess of 40 in a given workweek [add in any relevant state OT laws here].

This is a full-time position, and hours of work and days are [insert schedule]. Occasional evening and weekend work may be required as job duties demand.

Full-time employees are eligible for company benefits, including \_\_ [days/weeks] of vacation, which is accrued at the rate of \_\_\_\_\_ hours per biweekly pay period. We also offer health, dental and vision benefits, sick leave, company holidays and a 401(k) plan. A summary of company benefits is enclosed with this letter. Further details will be provided at the new-hire orientation program, scheduled during your first week on the job.

Your employment with our company is at will, which means that either you or the company may terminate the relationship at any time.

As previously discussed, [day, date] will be your first day of employment with us. Kindly indicate your understanding and acceptance of our offer by signing below and returning a copy in the enclosed envelope no later than [date]. This employment offer expires as of [date]. Should you have any questions, feel free to contact [name] at [number].

We look forward to seeing you on [date].

Sincerely,

\_\_\_\_\_\_\_\_\_\_\_

I accept the offer of employment set forth above.

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

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