Offer of Additional Work Hours to Existing Employees

Manager: Please Provide Employee With Up to 3 Days to Accept This Offer

Employee Name:	Date:
	Brand:
Store No.:	
Employment Status (FT/PT/CPT/S):	
Current average number of work hours	s per week:
Description and title of the position:	
Required qualifications for the position:	:
Schedule of available work shifts:	
Duration needed to cover additional ho	Durs:
I ACCEPT the additional number o	of work hours offered
I DECLINE the additional number of	of work hours offered
By signing below, I acknowledge that I was hours that were offered.	as provided up to three (3) days to accept the additional
Employee Signature/EssilorLuxottica ID	 Date
Manager Signature	

Nothing in this form is contractual in nature and nothing in it creates any contractual obligations by the Company. This form is not a contract of employment and does not obligate the Company to act in specific ways or to maintain any specific level or type of benefit. This form may be interpreted, applied, modified at the Company's sole discretion and without prior notice to associates.