UNGER
CONSTRUCTION CO.

Meal Period Waiver

I, _____, request that my meal period of 30 minutes be waived on the days I work six (6) hours or less. My normal schedule includes the following days and times of the week that this waiver would apply, if agreed to by my employer:

Day of the week	Scheduled time in and out	Total daily hours scheduled	Request Meal waiver for this day (Employee to initial each day requested)

I understand that I may only waive this meal period when I work six (6) hours or less and my employer mutually agrees to the waiver. This waiver will remain in effect until revoked by my employer or me. My employer or I may revoke this waiver at any time with advance written notice.

Signed:

_____ _____
Employee Date

Meal waiver request is approved:

_____ _____
Employer Date