



**Notice and Acknowledgement of Pay Rate and Payday Under Section 195.1 of the New York State Labor Law  
Notice for Employees Paid Salary for Varying Hours, Day Rate, Piece Rate, Flat Rate or Other Non-Hourly Pay**

**1. Employer Information**

Name:  
**Adolph H. Schreiber Hebrew Academy of  
Rockland**

Doing Business As (DBA) Name(s):  
**ASHAR**

FEIN (optional):  
**13-188-9110**

Physical Address:  
**360 New Hempstead Road  
New City, NY 10956**

Mailing Address:  
**360 New Hempstead Road  
New City, NY 10956**

Phone:  
**(845) 357-1515**

**2. Notice given:**

- At Hiring
- On or before February 1
- Before a change in pay rate(s), allowances claimed or payday

**3. Regular payday:** 15<sup>th</sup> and 31<sup>st</sup>

**4. Employee's Pay Rate:**

\$ \_\_\_\_\_ per \_\_\_\_\_

Specify the basis for the rate paid, i.e. salary for varying hours, day rate, etc.

Employers may not pay a non-hourly rate to a non-exempt employee in the Hospitality Industry, except for commissioned salespeople.

**5. Allowances taken:**

- None
- Tips \_\_\_\_\_ per hour
- Meals \_\_\_\_\_ per meal
- Lodging \_\_\_\_\_
- Other \_\_\_\_\_

**6. Pay is:**

- Weekly
- Bi-weekly
- Other

**7. Overtime Pay Rate:**

In most cases the overtime rate will be 1½ times the regular rate of pay for the week. The regular rate of pay is the total weekly pay divided by the hours worked in the week.

In most cases, it is illegal to pay a fixed weekly rate for varying hours worked over 40 per week. The Department of Labor strongly discourages weekly rates for non-exempt employees, since underpayments often result.

**8. Employee Acknowledgement:**

On this day, I received notice of my pay rate, overtime rate (if eligible), allowances, and designated payday. I told my employer what my primary language is.

**Check one:**

I have been given this pay notice in English because it is my primary language.

My primary language is \_\_\_\_\_ I have been given this pay notice in English only, because the Department of Labor does not yet offer a pay notice form in my primary language.

\_\_\_\_\_  
Print Employee Name

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

**David Katznelson – Executive Director**

Preparer Name and Title

**The employee must receive a signed copy of this form. The employer must keep the original for 6 years.**