

# WORK CONFIRMATION LETTER

Employer: \_\_\_\_\_  
Employee: \_\_\_\_\_  
Position: \_\_\_\_\_  
Work Location: \_\_\_\_\_

## **Employment Details:**

This letter serves as a formal confirmation of employment between the Employer and the Employee identified above.

The Employee is engaged by the Employer to perform the duties and responsibilities associated with the position specified herein, subject to the terms and conditions of employment.

The Employee's work schedule, compensation, and other employment terms are governed by a separate employment agreement or company policies, which remain binding and effective.

This confirmation letter is provided for the purpose of verifying employment status and does not constitute a contract of employment for any specified duration except as otherwise agreed in writing.

The Employee agrees to comply with all lawful directives, policies, and procedures of the Employer during the term of employment.

## **Confirmation of Work Period and Conditions:**

The Employee's work period commences upon the effective date agreed by both parties and continues until either party terminates the employment relationship in accordance with applicable laws and any contractual agreements. The Employee shall perform work diligently and adhere to all applicable workplace safety, confidentiality, and conduct standards. The Employer retains the right to manage, direct, and control the Employee's work to the extent permitted by law.

## **Compensation and Benefits:**

The Employee shall receive compensation as agreed between the parties, subject to applicable tax withholdings and deductions required by law. Other benefits, bonuses, or commissions may be provided in accordance with the Employer's policies or separate agreements. The Employer reserves the right to modify compensation and benefits in compliance with applicable employment laws and regulations.

## **Confidentiality and Proprietary Rights:**

The Employee acknowledges and agrees to maintain the confidentiality of all proprietary, confidential, and trade secret information of the Employer during and following the term of employment. All intellectual property, inventions, and work products developed in the scope of employment belong exclusively to the Employer, subject to applicable laws.

**Termination:**

Either party may terminate the employment relationship at any time, with or without cause, subject to any notice requirements established by law or agreement. Upon termination, the Employee shall promptly return all Employer property and settle any outstanding obligations.

**Governing Law:**

This work confirmation letter and any disputes arising out of or related to it shall be governed by and construed in accordance with the laws of the State of \_\_\_\_\_, without regard to its conflict of law principles.

**Acknowledgment:**

By signing below, the parties acknowledge that they have read, understood, and agree to the terms stated in this Work Confirmation Letter. This letter may be executed in counterparts and is effective as of the date of the last signature affixed below.

**EMPLOYER REPRESENTATIVE**

**EMPLOYEE**

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

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

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

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

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

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