



Meal Break Waiver Form

I understand the Grand Forks Park District, in accordance with North Dakota State law, requires all employees to be offered a minimum of a 30-minute unpaid meal break for working a shift exceeding five consecutive hours. I also understand that meal breaks are required to be offered only when two or more employees are on duty. Additionally, I understand, the Grand Forks Park District, in accordance with North Dakota State law, allows for an employee to waive their right to an unpaid meal break with the manager's approval.

By signing this Meal Break Waiver Form, I give my consent to waive my right to take a 30-minute unpaid meal break as a routine practice, pattern, or schedule. I understand that if I need/want to take a 30-minute meal break that I will inform my manager, it will be unpaid, and I need to clock out.

I request this waiver freely and voluntarily. I understand that I or my manager have the right to revoke this waiver at any time, which will require my signature in the revoke section below. This signed form will be put in my employee payroll file.

Employee Name (Print): _____ Position: _____

X _____
Employee Signature Date

X _____
Manager/Supervisor Signature Date

REVOKE:

I revoke this waiver: Employee Signature: _____ Date: _____

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