

ADMINISTRATIVE ASSISTANT EMPLOYMENT AGREEMENT

Location: _____ Effective Date: _____

Parties:

This Employment Agreement (the "Agreement") is made between:

Employer Name: _____

Employer Address: _____

Administrative Assistant Name: _____

Assistant Address: _____

1. Position and Duties:

Employer hereby employs Administrative Assistant, and Assistant accepts employment, to perform administrative and clerical duties as directed by Employer. Assistant agrees to devote best efforts, skills, and abilities to the position and comply with Employer's policies and instructions.

2. Term of Employment:

The employment relationship is at-will and may be terminated by either party at any time, with or without cause or notice, except as otherwise provided by law or this Agreement.

3. Compensation:

Salary or Hourly Rate: _____ USD

Payment will be made in accordance with Employer's regular payroll schedule, subject to applicable withholdings and deductions as required by law.

4. Work Schedule and Location:

Assistant shall work the agreed hours per week and perform duties at Employer's place of business or another mutually agreed location.

5. Confidentiality and Non-Disclosure:

Assistant acknowledges that during the course of employment, confidential and proprietary information will be disclosed. Assistant agrees not to use or disclose such information except as necessary to perform duties or as authorized by Employer.

6. Non-Competition and Non-Solicitation:

During employment and for one year following termination, Assistant shall not directly or indirectly engage in competing business activities or solicit Employer's clients, customers, or employees.

7. Equipment and Materials:

Employer shall provide necessary equipment and materials to perform duties. Assistant shall exercise reasonable care in their use and return all Employer property upon termination.

8. Benefits:

Assistant may be eligible to participate in Employer's benefit plans subject to plan terms and eligibility requirements. Employer reserves the right to modify or terminate benefits at any time.

9. Termination:

Either party may terminate this Agreement at any time. Upon termination, Assistant shall return all Employer property and settle any outstanding obligations.

10. Governing Law and Dispute Resolution:

This Agreement shall be governed by the laws of the State of _____. Any disputes shall be resolved through binding arbitration in accordance with the rules of the American Arbitration Association or as otherwise mutually agreed.

11. Entire Agreement:

This Agreement constitutes the entire understanding between parties and supersedes all prior agreements or understandings, whether written or oral, relating to the subject matter hereof.

12. Amendments:

Any amendments or modifications to this Agreement must be in writing and signed by both parties to be effective.

13. Severability:

If any provision of this Agreement is held invalid or unenforceable, the remainder shall remain in full force and effect.

14. Waiver:

Failure to enforce any provision of this Agreement shall not constitute waiver of that or any other provision.

15. Notices:

All notices under this Agreement shall be in writing and shall be deemed given when delivered personally, sent by certified mail, or by recognized overnight courier to the parties' addresses stated above or as updated in writing.

16. Signatures:

The parties have executed this Agreement as of the Effective Date.

EMPLOYER'S SIGNATURE

ADMINISTRATIVE ASSISTANT'S SIGNATURE

Signature: _____

Signature: _____

Name: _____

Name: _____

Title: _____

Date: _____

Date: _____

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