**Addendum to Employment Contract - Statutory Sick Pay**

***Add/delete information in brackets as appropriate***

[Insert name]

[insert address]

[Insert date]

**RE: Addendum to Employment Contract dated [insert date of contract]**

Dear [insert name],

The following is an amendment to your original contract dated [insert date]:

**Point [insert clause number] of your original contract [– insert name of clause]**

A medical certificate must support terms of illness [exceeding [insert number of days] days. Medical certificates are required to be submitted ahead of any intended period of absence.

All employees are entitled to the benefit of the Statutory Sick Pay scheme:

* Paid sick leave for up to 3 sick days per year in 2023 (from date of enactment), 5 days in 2024, 7 days in 2025 and 10 days in 2026.
* A rate of payment for statutory sick leave of 70% of normal wages to be paid by employers (up to a maximum €110 per day).

To be entitled to paid sick leave, the employee must be working with [insert name of employer] for at least 13 weeks. You will also need to be certified by a GP as unfit to work.

All other points in [insert clause number] [Insert name of clause] remain the same.

Your other terms and conditions remain as set out in your original contract of employment.

This addendum to your contract is in duplicate.

Please acknowledge your acceptance of the additions in the above addendum to your contract dated [insert date] by countersigning below and returning one copy to [insert named person or title].

Yours sincerely

[Insert name]

[Insert title]

I, [Insert name] confirm that I have read, understand and agree to accept the changes to Point [insert clause number] in the above addendum to my contract which replace point [insert clause number] of my contract dated [insert date] and I have read, understand and agree to accept the additions in the above addendum to my contract dated [insert date].

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**Insert name Date**