

# Certificate of employment

(to be completed by the employer)

**Maison Relais Packatuffi**

Maison 84  
L-9768 Reuler

Form SEA-03

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**rpac.elisabeth.lu**

The certificate serves to evaluate the childcare needs of your employee.

## Name of employee

## Name of child

\_\_\_\_\_

First name

\_\_\_\_\_

Surname

\_\_\_\_\_

First name

\_\_\_\_\_

Surname

## Working hours

The employee works  
\_\_\_\_\_ hrs / week on a contract :

permanent contract

fixed term contract (from \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_).

## Absent from work (if applicable)

The employee is currently absent from work for the period from \_\_\_\_\_ to \_\_\_\_\_ due to:

unpaid leave

maternity leave

parental leave

work exemption

(other, specify) : \_\_\_\_\_.

## Work schedule

<u>Monday</u>	<u>Tuesday</u>	<u>Wednesday</u>	<u>Thursday</u>	<u>Friday</u>	<u>Saturday</u>	<u>Sunday</u>
from to	from to	from to	from to	from to	from to	from to
to	to	to	to	to	to	to
to	to	to	to	to	to	to

Comments : \_\_\_\_\_

## Name and role of signatory

\_\_\_\_\_

First name

\_\_\_\_\_

Surname

\_\_\_\_\_

Role

\_\_\_\_\_

Date

\_\_\_\_\_

Signature

\_\_\_\_\_

comptany stamp

For administrative use	
Form submitted	on ___/___/___ at ___ a.m./p.m.
Submitted via	<input type="checkbox"/> e-mail <input type="checkbox"/> post <input type="checkbox"/> delivered by hand _____