

Dear candidate,

Attached is a "Rights leaflet" detailing the trainees' rights as employees in an agricultural farm.

**Please note:** some of the rights set forth in the "Rights leaflet" are excess rights beyond those granted to an employee according to Israeli labor laws:

- **Convalescence pay:** according to law, an employee is entitled to convalescence pay only after completion of 12 employment month at the employer;
- **Severance pay:** according to law, an employee is entitled to severance pay only after completion of 12 employment month at the employer;
- **Annual bonus:** according to law the right to an annual bonus is established after completion of 6 employment months, while an hourly paid employee is entitled to a bonus in the amount of 4 NIS per each working day;
- **Subsistence allowance:** an hourly paid employee is entitled to subsistence allowance in the amount of 4 NIS per working day;
- **Holidays:** according to law, an employee is entitled to payment of holiday fees only after completion of 3 working months;
- **Leave:** according to law, an employee who was employed by the employer during part of a calendar year (January - December) is entitled to 12 leave days only if he has completed 240 working days during that year. If he worked less than 240 days during such calendar year, he is entitled to a pro-rata number of leave days according to the number of his working days.

In light of the above, the trainees' entitlement to these rights is under dispute, and there is a possibility that the rights specified above or any part thereof will not be granted to the trainees.

**By signing this document you declare and confirm that you know and understand the possibility that you will not be entitled to receive the above rights or any part thereof or that you will be entitled to same only in a partial manner; that notwithstanding the above you have chosen to participate in the training program, knowing that it is possible that such rights will not be granted to you; and that you will have no demand or claim against the training center regarding this matter.**

Full name: \_\_\_\_\_

Passport number: \_\_\_\_\_

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