Student Break Waiver Form

I understand the University of North Dakota, in accordance with North Dakota State law, requires all student employees be offered a minimum of a 30-minute unpaid meal break for working a shift exceeding five (5) consecutive hours. Additionally, I understand, the University of North Dakota, in accordance with North Dakota State law, allows for a student employee to waive their right to an unpaid meal break.

By signing this Student Break Waiver Form, I _____, waive my right to take an unpaid meal break. I understand I have the right to revoke this waiver at any time by notifying my supervisor.

_____	_____	_____
Student Signatures	Date	Student ID#

_____	_____
Supervisor or Department Signature	Date

Human Resources & Payroll Services

Twamley Hall, Room 205

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Grand Forks, ND 58202