

Date: [Date]

To: [Employee Name]

Employee ID: [ID Number]

Position: [Job Title]

Subject: Notification of Overtime Exemption Status

Dear [Employee Name],

This letter serves as formal notification regarding your employment classification under the Fair Labor Standards Act (FLSA) and applicable state laws.

Based on your job duties and compensation level, your position has been classified as **Exempt**. This means that you are not eligible for overtime pay for hours worked in excess of 40 hours per workweek.

As an exempt employee, you will receive a predetermined salary that covers all hours worked. Your current annual salary is [Amount], payable in [Monthly/Bi-weekly] installments of [Amount].

Please review this information and sign below to acknowledge that you understand your status as an exempt employee and the associated compensation structure.

Sincerely,

[Name of Manager/HR Representative]
[Company Name]

Employee Acknowledgment:

I hereby acknowledge that I have been informed of my status as an exempt employee. I understand that I am not eligible for overtime pay and that my salary is intended to compensate me for all hours worked.

Signature: _____ Date: _____