#### **CARE GIVER CONTRACT**

### **PARTIES**

This Caregiving Agreement ("Agreement") is made and entered into as of [Date], by and between [Caregiver's Full Name], an independent caregiver, residing at [Caregiver's Address] ("Caregiver"), and [Client's Full Name], residing at [Client's Address] ("Client"). The Caregiver and the Client may be referred to individually as a "Party" or collectively as the "Parties."

#### **SERVICES PROVIDED**

The Caregiver shall provide the following services to the care recipient, [Care Recipient's Name], which may include, but are not limited to: [list specific tasks such as bathing, medication management, meal preparation, etc.]. These services will be provided at [Location, e.g., care recipient's home]. Specific duties may be adjusted as per the care recipient's evolving needs, with amendments to this contract made in writing.

### **SCHEDULE AND HOURS**

The Caregiver will work [specify days of the week] from [start time] to [end time]. Adjustments to this schedule can be made with [number of days] days' notice. Overtime will be compensated at a rate of [overtime rate] per hour, in accordance with state and federal regulations.

## **COMPENSATION AND BENEFITS**

The Caregiver will be compensated at a rate of \$[hourly/weekly/monthly rate] payable [weekly/bi-weekly/monthly]. Additional benefits provided will include [list any benefits such as health insurance, paid time off, etc.]. Reimbursements for [specify reimbursable expenses] will be provided upon submission of relevant receipts.

#### **DURATION**

This Contract will commence on [start date] and will continue [specify if it's on a fixed-term or ongoing basis]. Conditions for renewal or termination will be outlined in the Termination clause.

#### **TERMINATION**

Either party may terminate this Contract with [number of days] days' written notice. Immediate termination is applicable under circumstances of [list circumstances such as breach of contract, misconduct, etc.].

#### TRAINING AND QUALIFICATIONS

The Caregiver must maintain [specify certifications or qualifications] and participate in ongoing training as required to meet the needs of the care recipient. Costs associated with required training are [to be borne by the Caregiver/the Client].

#### **SAFETY AND HEALTH**

Provisions for the safety and health of the Caregiver while performing duties include [specify any particular safety protocols, emergency procedures, etc.]. Both parties agree to adhere to these standards rigorously.

# **INSURANCE AND LIABILITY**

[Client's Name] agrees to maintain liability insurance covering the Caregiver while on duty. The Caregiver is responsible for personal insurance coverage. Details of the policy/policies are as follows: [Policy Details].

# **SIGNATURE**

This Contract	is signed	by the	parties	on the	dates	below,	indicating	their fi	ull agreemen	it to the
terms set forth	above.									

[Caregiver's Name]	Date: _	
[Client's Name]	Date:	