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# Statement of Work

## Employee Name

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Employee Address

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## SOW for Employment by City of Vision Eye Care

### Date

Today's Date

### By:

Employee Name

Employee Address

### For:

City of Vision Eye Care

4025 Jackie Road Se

Rio Rancho, NM 87124

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This Statement of Work (SOW) is issued pursuant to the Employment Master Agreement between City of Vision Eye Care ("Employer") and Employee Name ("Employee"), effective Today's Date (the "Agreement"). This SOW is subject to the terms and conditions contained in the Agreement between the parties and is made a part thereof. Any term not otherwise defined herein shall have the meaning specified in the Agreement. In the event of any conflict or inconsistency between the terms of this SOW and the terms of this Agreement, the terms of this SOW shall govern and prevail.

This SOW (hereinafter called the "SOW"), effective as of Today's Date, is entered into by and between Employee and Employer, and is subject to the terms and conditions specified below. The Exhibit(s) to this SOW, if any, shall be deemed to be a part hereof. In the event of any inconsistencies between the terms of the body of this SOW and the terms of the Exhibit(s) hereto, the terms of the body of this SOW shall prevail.

## Period of Performance

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The employment shall commence on Today's Date, and shall continue through 90 days from start (Probation end date).

## Scope of Work

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See attached job description & duties

## Employee Responsibilities

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See attached employment policies manual



## Hours

This employment will be conducted on an hourly basis. Training will begin on a \_\_\_ hour per day, \_\_\_ days per week basis. Hours are subject to increase through mutual agreement between employer and employee based on scheduling needs and speed of skill advancement.

## Fee Schedule

This employment will be conducted on an hourly basis. The total weekly hours pursuant to this SOW shall not exceed 40 unless otherwise agreed to by both parties. Upon completion of this Performance Period, Employee and Employer will have the option to renew or modify this agreement for continued employment. Payment shall be delivered by the employer to the employee in office by check every other Thursday.

| Item Description               | Hourly Rate |
|--------------------------------|-------------|
| Starting                       | \$          |
| 33%Competency Obtained         | \$          |
| 66%Competency Obtained         | \$          |
| 99%Competency Obtained         | \$          |
| Completion of 90-day probation | \$          |

## Completion Criteria

Employee shall have fulfilled its obligations when any one of the following first occurs:

- Employee accomplishes the Employee activities described within this SOW and Employer accepts level of competency without unreasonable objections.
- Employee and/or Employer has the right to cancel employment not yet provided with 10 business days advance written notice to the other party.

**IN WITNESS WHEREOF**, the parties hereto have caused this SOW to be effective as of the day, month and year first written above.

\_\_\_\_\_  
Dean Reynolds OD (Employer) / (Signature) / Date

\_\_\_\_\_  
Name (Employee) / (Signature) / Date

\_\_\_\_\_  
(Manager) / (Signature) / Date