

## **Farm Labor Recordkeeping Checklist**

## **Employee Information**

Records related to individual employee identification and basic details.

Employee Full Name	
Write something	
Employee Social Security Number (SSN) / EIN (for independent contractors	<b>)</b>
Enter a number	
Date of Hire	
Enter date	
Employee Hourly Wage / Salary	
Enter a number	

Employee Job Title    Field Worker   Equipment Operator   Harvest Crew   Irrigation Specialist   Other
Emorgonou Contact Information (Nome Dhene Number Deletionship)
Emergency Contact Information (Name, Phone Number, Relationship)  Write something
Copy of Employee Identification (e.g., Driver's License, Passport)  4 Upload File
Employee Work Authorization Status
US Citizen
Legal Permanent Resident
☐ H-2A Visa Holder ☐ Other Work Visa
☐ Not Applicable
Hours Worked  Detailed tracking of hours worked by each employee.
Date of Work
Enter date

Start Time (Military Time)	
Enter a number	
End Time	
Regular Hours Worked	
Enter a number	
Overtime Hours Worked	
Enter a number	
Break Time (Minutes)	
Enter a number	
Task/Job Description	
☐ Field Preparation ☐ Planting	
☐ Irrigation	
Harvesting	
Weeding	
Maintenance	
Other	

Write something	
lages and Compensation	ensation.
Hourly Wage Rate	
Enter a number	
Overtime Rate (if applicable)	
Enter a number	
Gross Pay (per pay period)	
Enter a number	
Bonus Amount (if applicable)	
Enter a number	
Commission Amount (if applicable)	
Enter a number	

Write something	
Pate of Pay	
Enter date	
otal Pay for the Pay Period	
Enter a number	
ederal Income Tax Withheld	
Enter a number	
Enter a number  State Income Tax Withheld	
State Income Tax Withheld	
State Income Tax Withheld	
State Income Tax Withheld  Enter a number	

Medicare Tax With	held			
Enter a number				
- - - - - - - - - - - - - - - - - - -	Oromiume With	held		
Enter a number	- Telliuliis Witi			
Litter a number				
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Retirement Contril	outions (401k,	etc.) withine	<u> </u>	
Enter a number				
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**Training Date** 

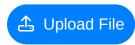
Enter date...

Training Type  Safety Training Equipment Operation Pesticide Application First Aid/CPR Other
Training Content/Description  Write something
Certificate of Completion (if applicable)  L Upload File
Duration of Training (in hours)  Enter a number
Trainer Name

## **Work Contracts & Agreements**

Copies of employment contracts, agreements, and any relevant documentation outlining terms of employment.

**Copy of Employment Contract (if applicable)** 



Agreed Upon Wage Rate (per hour/day/piece)  Enter a number  Payment Frequency (as per agreement)  Weekly  Bi-Weekly  Semi-Monthly  Monthly  Employee Signature (acknowledging agreement)	Enter date	
Description of Job Duties & Responsibilities (as outlined in agreement)  Write something  Agreed Upon Wage Rate (per hour/day/piece)  Enter a number  Payment Frequency (as per agreement)  Weekly  Bi-Weekly  Semi-Monthly	Contract End Date (if applicable)	
Agreed Upon Wage Rate (per hour/day/piece)  Enter a number  Payment Frequency (as per agreement)  Weekly  Bi-Weekly  Semi-Monthly  Monthly  Employee Signature (acknowledging agreement)	Enter date	
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Weekly Bi-Weekly Semi-Monthly Monthly  Employee Signature (acknowledging agreement)	Enter a number	
Bi-Weekly Semi-Monthly Monthly  Employee Signature (acknowledging agreement)	ayment Frequency (as per agreement)	
Semi-Monthly  Monthly  Employee Signature (acknowledging agreement)	Weekly	
Monthly  Employee Signature (acknowledging agreement)	] Bi-Weekly	
Employee Signature (acknowledging agreement)	Semi-Monthly	
	Monthly	
	Employee Signature (acknowledging agreement)	
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## **Record Retention & Organization**

Guidelines and procedures for safely storing and organizing labor records.

Enter a number	
Explanation of Record Retention Policy (Why this duration?)	
Write something	
Storage Method (Physical or Digital)	
Physical Storage (Paper)	
Digital Storage (Electronic)	
Description of Physical Storage Location (if applicable)	
Write something	
Description of Digital Storage System (if applicable, include backup procedures)	
Write something	

Access Permissions to Records
Restricted to Farm Owner/Manager
Limited Access to Designated Personnel
Open Access (Not Recommended)
Last Record Storage Review Date
Enter date
Compliance & Legal Requirements
Checklist items related to federal, state, and local labor laws.
Federal Minimum Wage Compliance
Meets or Exceeds Federal Minimum Wage
Does Not Meet Federal Minimum Wage (Investigation Needed)
State Minimum Wage Compliance
Meets or Exceeds State Minimum Wage
Does Not Meet State Minimum Wage (Investigation Needed)
Last I-9 Form Review Date
Enter date
Overtime Pay Compliance (FLSA)
Compliant with FLSA Overtime Rules
Potential FLSA Overtime Issues – Review Needed

Write something	
Worker Classification (Employee vs. Contractor)  All Workers Properly Classified  Potential Misclassification – Review Needed	
Last Wage and Hour Audit  Enter date	