

# Sample Employee Benefits Policy

Effective Date: \_\_\_\_\_

Approved By: \_\_\_\_\_

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## 1. Purpose

This Employee Benefits Policy outlines the various benefits provided by [Company Name] to eligible employees. The purpose of this policy is to provide a clear understanding of available benefits, eligibility criteria, and application procedures.

## 2. Scope

This policy applies to all eligible full-time and part-time employees of [Company Name]. Certain benefits may only apply to specific employee classifications as described below.

## 3. Health Insurance

- Eligible employees may enroll in the company-sponsored health insurance plan effective upon completion of the probationary period.
- Details regarding plan options and contribution amounts will be provided during onboarding.
- Dependents may also be covered as per plan terms.

## 4. Dental & Vision Insurance

- Optional dental and vision insurance plans are available to eligible employees.
- Enrollment procedures and premium contributions will be communicated by Human Resources.

## 5. Retirement Plans

- [Company Name] offers a [401(k)/Pension] plan to eligible employees.
- Company matching contributions may be available as per plan guidelines.
- Enrollment information is provided after completion of eligibility requirements.

## 6. Paid Time Off (PTO)

- PTO combines vacation, personal, and sick leave into a single bank.
- The amount of PTO accrual is based on length of service and employment status.
- All PTO requests must be submitted in advance and approved by the supervisor.

## 7. Holidays

- [Company Name] observes the following paid holidays:
  - New Year's Day
  - Memorial Day
  - Independence Day
  - Labor Day
  - Thanksgiving Day
  - Christmas Day
- Holiday dates may be adjusted annually at the company's discretion.

## 8. Other Benefits

- Life & Disability Insurance
- Employee Assistance Program (EAP)
- Professional Development

- Flexible Work Arrangements (as applicable)

## 9. Eligibility

Eligibility for each benefit may vary based on position, employment status, and length of service. Please consult the Human Resources Department or the Employee Handbook for full details.

## 10. Policy Revision & Exceptions

[Company Name] reserves the right to amend, suspend, or terminate any benefit plan at any time. Exceptions to this policy must be approved in writing by senior management.

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**Employee Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**HR Representative:** \_\_\_\_\_ **Date:** \_\_\_\_\_