

Accrual Policy Questionnaire

Company Name: _____ Company ID: _____

Accruals Contact Name: _____

Accruals Contact Phone Number: _____ Email: _____

The policy (s) we have in place are: (Mark an "X" to each that applies)

VACATION	
-How often should employees accrue? (check one box only)	
Per Hour Worked <input type="checkbox"/>	Each Pay Period <input type="checkbox"/>
Monthly (First Pay) <input type="checkbox"/>	Monthly (Last Pay) <input type="checkbox"/>
Annually By Calendar Year <input type="checkbox"/>	
Annually By Employee Anniversary <input type="checkbox"/>	
-Is there a probation period? Yes No	
If Yes, how many days? _____	
-Can Only Active Employees Accrue? Yes No	
If No, list the other employees (ex. leave of absence)	
Other: _____	
-Which types of employees can accrue?	
Regular Full Time <input type="checkbox"/>	
Regular Part Time <input type="checkbox"/>	

SICK	
-How often should employees accrue? (check one box only)	
Per Hour Worked <input type="checkbox"/>	Each Pay Period <input type="checkbox"/>
Monthly (First Pay) <input type="checkbox"/>	Monthly (Last Pay) <input type="checkbox"/>
Annually By Calendar Year <input type="checkbox"/>	
Annually By Employee Anniversary <input type="checkbox"/>	
-Is there a probation period? Yes No	
If Yes, how many days? _____	
-Can Only Active Employees Accrue? Yes No	
If No, list the other employees (ex. leave of absence)	
Other: _____	
-Which types of employees can accrue?	
Regular Full Time <input type="checkbox"/>	
Regular Part Time <input type="checkbox"/>	

PTO	
-How often should employees accrue? (check one box only)	
Per Hour Worked <input type="checkbox"/>	Each Pay Period <input type="checkbox"/>
Monthly (First Pay) <input type="checkbox"/>	Monthly (Last Pay) <input type="checkbox"/>
Annually By Calendar Year <input type="checkbox"/>	
Annually By Employee Anniversary <input type="checkbox"/>	
-Is there a probation period? Yes No	
If Yes, how many days? _____	
-Can Only Active Employees Accrue? Yes No	
If No, list the other employees (ex. leave of absence)	
Other: _____	
-Which types of employees can accrue?	
Regular Full Time <input type="checkbox"/>	
Regular Part Time <input type="checkbox"/>	

OTHER: _____	
-How often should employees accrue? (check one box only)	
Per Hour Worked <input type="checkbox"/>	Each Pay Period <input type="checkbox"/>
Monthly (First Pay) <input type="checkbox"/>	Monthly (Last Pay) <input type="checkbox"/>
Annually By Calendar Year <input type="checkbox"/>	
Annually By Employee Anniversary <input type="checkbox"/>	
-Is there a probation period? Yes No	
If Yes, how many days? _____	
-Can Only Active Employees Accrue? Yes No	
If No, list the other employees (ex. leave of absence)	
Other: _____	
-Which types of employees can accrue?	
Regular Full Time <input type="checkbox"/>	
Regular Part Time <input type="checkbox"/>	

****Please Provide a Copy of Your Policy Along with this Questionnaire****