

MARISTAFF POLICIES AND PROCEDURES CHECKLIST

- I am telephone accessible and I have reliable transportation.
- If for some unexpected reason such as an emergency or illness I cannot make it to work or will be late, I will contact MARISTAFF as soon as possible so MARISTAFF can call the client and/or find a replacement. My failure to do so may be grounds for dismissal and/or indicate that I have quit.
- I understand that adequate attendance is necessary on any job. I further understand that inadequate attendance could result in my termination and in my ability to qualify for unemployment benefits.
- I understand that I am expected to complete any job assignment I accept and that failure to do so without proper notification will be considered a Quit Without Notice and will result in a reduction of my wage to minimum wage.
- I understand that I am an employee of MARISTAFF and only MARISTAFF or I can terminate my employment. When an assignment ends I must report my availability to my MARISTAFF office weekly. Failure to do so will indicate that I have voluntarily quit and will impact my eligibility for unemployment benefits.
- Unless special arrangements have been made, I understand MARISTAFF will not recognize or pay for any hours worked by an employee in the absence of a MARISTAFF timesheet signed by both the client and the employee.
- MARISTAFF has a very strict "NO DRUG POLICY", and I have signed a consent form to submit to drug testing. Failure to consent to a drug screen will result in my immediate termination.
- I understand that in order to be paid in a timely manner, timesheets must be turned in no later than 12.00 Noon each Monday following the week worked. Any late timesheets will not be paid until the next payroll the following week. .
- MARISTAFF pays its employees once a week. Our pay period starts on Monday and ends on Sunday. My paycheck will be ready on Friday following the week worked at 12:00 noon, 2:00pm on holiday weeks.
- I understand that MARISTAFF has a strict "Sexual Harassment Policy" and any complaints should be reported to my MARISTAFF supervisor immediately.
- If I sustain an injury on the job, I will inform the client and MARISTAFF immediately. MARISTAFF will coordinate appropriate treatment of the injury and reporting of the accident with me. A drug test is required for any on-the-job injury. Failure to report the injury promptly could jeopardize my insurance benefits.
- I have viewed any postings, safety policy and/or videos on safety and/or health issues.
- I understand and will comply with MARISTAFF's safety rules and regulations and hazardous communication program explained to me in MARISTAFF's orientation.
- All of the information given on my application is correct to the best of my knowledge.
- I have read and fully understand the above statements regarding policies and procedures and agree to the same. I understand that failure to comply with these policies and procedures could lead to my termination and may jeopardize my benefits.

Applicant

Date

MARISTAFF

Date