

## POLICIES AND PROCEDURES CHECKLIST

(Please read and initial each line)

\_\_\_\_\_ I understand once I accept an assignment from Dickey Staffing Solutions, I am committed to completing the assignment. Failure to report to any assignment I accept will indicate I have quit.

\_\_\_\_\_ I understand that any information I learn while on any assignment for Dickey Staffing Solutions is to be kept confidential.

\_\_\_\_\_ I understand I am an employee of Dickey Staffing Solutions, and only Dickey Staffing Solutions or I can terminate my employment. When an assignment ends, I must notify Dickey Staffing Solutions within 24 hours. Failure to do so will indicate I have voluntarily quit.

\_\_\_\_\_ I understand that once my assignment concludes, I am required to call Dickey Staffing Solutions availability message center (815-636-4484) to report my availability at least three times per week until I am placed on another assignment.

\_\_\_\_\_ Dickey Staffing Solutions has a very strict "NO DRUG POLICY", and I have signed a consent form to submit to drug testing. I understand that my failure to comply with this agreement will be grounds for my immediate termination.

\_\_\_\_\_ I understand that cell phone usage during working hours is prohibited and usage is grounds for termination.

\_\_\_\_\_ Once I have accepted a job, I must report to Dickey Staffing Solutions' office to pick up a time card. Unless special arrangements have been made, I understand Dickey Staffing Solutions will not recognize or pay for any hours worked by an employee in the absence of an individual time card signed by both the client and the employee.

\_\_\_\_\_ If for some unexpected reason, such as an emergency or illness, I cannot make it to work or will be late, I will contact Dickey Staffing Solutions before my designated start time so you can call the client and/or find a replacement. My failure to do so may be grounds for dismissal.

\_\_\_\_\_ If I have any kind of work-related accident/injury, I will inform the client and Dickey Staffing Solutions immediately. Dickey Staffing Solutions will coordinate with the client and myself the proper procedure for treatment and reporting of the accident.

\_\_\_\_\_ I understand and will comply with Dickey Staffing Solutions' and its client's safety rules and regulations and/or hazardous communication programs.

\_\_\_\_\_ Dickey Staffing Solutions pays its employees once a week. The pay period starts on Monday and ends on Sunday, unless I am instructed otherwise. My check will be available after 1:30 p.m. on Tuesday following the week worked, unless I am instructed otherwise.

\_\_\_\_\_ I understand that in order to be paid in a timely manner, timecards must be turned in no later than 1:30 p.m. on the Monday following the week worked. Any late timecards will not be paid until the following week's payroll.

\_\_\_\_\_ I received a copy of Dickey Staffing Solutions' Employee Orientation Guide and understand I am responsible for reading it and abiding by the policies and procedures contained within the guide. I have read and fully understand the above statements regarding Dickey Staffing Solutions' policies and procedures form and agree to the same. I understand that failure to comply with these policies and procedures could lead to my termination and may jeopardize any benefits I may otherwise be entitled to.

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Interviewer

\_\_\_\_\_  
Date