

**ACKNOWLEDGEMENT OF RECEIPT OF
DRUG-FREE AND ALCOHOL-FREE WORKPLACE POLICY**

I certify that I have received a copy of FurstStaffing’s Drug-Free and Alcohol-Free Workplace Policy.

Applicants deemed suitable for hire, or who would be potentially offered a position, will be screened for the use of illegal drugs. Employees shall be subject to testing at the time of hire and each time they are assigned to a work site unless the employee has been tested within 12 months of the date of placement (unless additional testing is otherwise requested by a Client Company).

Once the drug screening process has started, the employee/applicant may not leave the testing facility until the process is completed. If this process is not completed, the same rule applies as if it was a failed drug test. Applicants who fail a pre-assignment drug test become ineligible to work for FurstStaffing for six months. Employees who fail a drug test are terminated immediately.

I understand that my continued employment with FurstStaffing is contingent upon my compliance with this policy and that my refusal to cooperate may result in disciplinary action, up to and including termination of employment. I have been advised that FurstStaffing reserves the right to exercise its discretion with respect to the enforcement of this policy and agree that the policy does not establish any contractual rights to ongoing employment with FurstStaffing or otherwise alter the at-will nature of our employment relationship.

If I refuse to submit to the drug and alcohol screen, FurstStaffing may request me to drug or alcohol screen in accordance with the Reasonable suspicion clause in the FurstStaffing Drug-Free and Alcohol-Free Workplace Policy.

I authorize FurstStaffing, its Client Companies and their testing facilities to release to each other any drug and/or alcohol test results when such testing is required as a condition of my employment or placement. I further agree to sign HIPAA Authorization forms when and as requested by FurstStaffing, a Client Company or testing company. A refusal to do so will be considered a failed test result and will result in termination of employment.

- I attest to being at least 18 years of age
- I am under 18 years of age and have provided a signed “Parental Consent for Treatment and Drug Test”

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*** Revised May 2010 ***

*This Reference Manual replaces all previous
FurstStaffing Reference Manuals*

CONTACT INFORMATION

LOCATION: Rockford Plaza
2580 Charles St.
Rockford, IL 61108

MAILING ADDRESS: P.O. Box 5863
Rockford, IL 61125

TELEPHONE NO: (815) 229-7810

AVAILABILITY LINE: (815) 229-7872

When you are available for work, we request that you call our 24-hour Availability Line **at least once a week** and leave a message clearly stating your name, social security number, phone number and shift availability. **Note: If you are changing your availability status or your phone number, you are required to speak directly to a Furst representative.**

FAX NUMBERS: (815) 229-7832 Payroll
(815) 229-9320 General
(815) 381-5507 General

WEB SITE ADDRESS: www.furststaff.com
www.furstprofessionals.com

EMAIL ADDRESS: rockford@furststaff.com

OFFICE HOURS FOR IN-PERSON VISITS:
Monday – Friday 7:00 AM – 5:00 PM
Saturday (by appt.) 8:00 AM – 12:00 PM

OFFICE HOURS AVAILABLE BY PHONE:
Monday – Thursday 6:00 AM – 9:00 PM
Friday 6:00 AM – 5:30 PM
Saturday 8:00 AM – 12:00 PM
Sunday 6:00 PM – 9:00 PM

Voice mail with a time/date stamp is available to receive your message when we are not available.

INFORMATION CHANGES

Employee forms may be found on our website www.furststaff.com.

- ◇ Federal I9 Form
- ◇ Illinois & Wisconsin W4 Form
- ◇ Federal W4 Form
- ◇ Change of Address Form

HIPAA AUTHORIZATION RELEASE OF DRUG/ALCOHOL TEST RESULTS

I understand that my employment with FurstStaffing is contingent upon my compliance with FurstStaffing's Drug-Free and Alcohol-Free Workplace Policy, which requires drug and/or alcohol testing in certain circumstances, and requires the release of the results of such testing to FurstStaffing and Client Companies of FurstStaffing whenever the testing is required as a condition of my employment or placement.

I hereby authorize FurstStaffing and/or its drug testing facility to release any drug and/or alcohol test results to Client Companies of FurstStaffing when required as a condition of my placement with them. I also authorize a Client Company and/or its drug testing facility to release those results to FurstStaffing, my current employer, in the event I am requested by a Client Company to submit to a drug or alcohol screen.

I acknowledge that the disclosures authorized above are for employment purposes. I understand that if I refuse to sign this Authorization, FurstStaffing or the Client Company or its testing facility may refuse to disclose the results to each other.

I understand that I may revoke this Authorization in writing at any time, except to the extent information was released or other action taken in reliance on it. Any written revocation must be signed by me and delivered to FurstStaffing. My signature may need to be witnessed to make the revocation effective.

This Authorization shall expire, without my express revocation, upon the date that is the later of two years after the date of my signature below or two years after the date on which my employment with FurstStaffing ends.

I understand that there is the potential for the information to be subject to re-disclosure by the recipient and no longer protected by HIPAA, however, this authorization will not affect any other obligations the recipient has to maintain the confidentiality of the information.

I understand that I have the right to inspect and copy the information that is requested to be released pursuant to this Authorization.

I further understand that my health information may be electronically stored on the computer, as well as in hard copy. I understand that I am authorizing the aforementioned information to be released orally, through copies of testing results, and/or by fax.

ACKNOWLEDGMENT OF SAFETY AWARENESS AND INJURY PROCEDURES

I _____ understand that it is my responsibility, while working on assignment for FurstStaffing, to exercise common sense and good judgment at all times. I am expected to follow all rules and guidelines established and I am required to report all unsafe conditions to my company workplace supervisor immediately.

I further understand that any employee working for FurstStaffing who witnesses or sustains an injury must report it immediately to both the company workplace supervisor and a FurstStaffing representative.

If medical attention is necessary, I am aware that I am required to inform the medical facility that I am to be tested for drugs of abuse and alcohol.

I have also been made aware of the fact that taking someone else's prescription medication constitutes illegal use of drugs.

I hereby authorize and give full permission to have FurstStaffing and/or its company medical physician send a specimen of my urine and/or blood to a laboratory for a screening test to check for the presence of illegal drugs, alcohol, or prescription medication taken without a prescription.

I will hold all parties harmless, meaning, I will not sue nor hold responsible, for any alleged harm to me or interference with my obtaining a job or continuing employment due to refusing to submit to the tests or as a result of report of the tests. This includes possible clerical or laboratory error.

I understand that failure to work safely and/or failure to follow FurstStaffing's established injury procedures will warrant disciplinary action up to and including release from assignment and termination from FurstStaffing.

EMPLOYMENT POLICY

FurstStaffing is an equal opportunity employer. We are dedicated to a policy of non-discrimination in employment on any basis. We will not use the information in your application to discriminate against you with respect to your compensation, terms, conditions, or privileges of employment because of race, creed, color, age, sex, sexual orientation, religion, national or ethnic origin, political beliefs, veteran's status, physical or mental disability, or any other factor prohibited by applicable law. Please understand that you are not required to answer any question in the application you believe would deny you equal employment opportunity.

Currently you are a registered applicant. Your application will be considered current for a period of two years after it is filed. If you wish to be considered for employment after that period, you must submit a new application.

Nothing in this Reference Manual constitutes an offer of employment or a binding contract. All employees of FurstStaffing are terminable at will and, therefore, may be terminated at any time, with or without cause and with or without notice. Completing an application and registration does not guarantee placement.

WHEN DO YOU BECOME AN EMPLOYEE?

You are officially hired when you are contacted by our office, accept a job assignment, and actually work on the assignment.

HIRING CRITERIA

FurstStaffing takes your entire application into consideration in our hiring process. We carefully consider the following factors:

- ◇ Your interview including interaction with staff
- ◇ Presentation of yourself while at FurstStaffing
- ◇ Past work history and references
- ◇ Criminal background
- ◇ Social Security Number verification
- ◇ Drug Screen

Our employment opportunities are always changing! Search our current job listings at our website www.furststaff.com.

JOB ASSIGNMENT INFORMATION

OFFER

On every assignment your employer is FurstStaffing. When our office calls to offer an assignment we will inform you of:

- ◇ Job title and specific tasks
- ◇ The client's business and location
- ◇ Work schedule
- ◇ Skills required
- ◇ Physical requirements
- ◇ Appropriate attire and required personal protective equipment
- ◇ Pay rate and payroll procedure
- ◇ Approximate length of assignment

Please be sure to ask any questions necessary to clarify what the position entails. You have the prerogative to accept or refuse any assignment. It is important at this time that you inform us of any plans or other commitments that may conflict.

FIRST DAY

- ◇ If you get lost on the way to your assignment, DO NOT RETURN HOME. You are required to call FurstStaffing at (815) 229-7810.
- ◇ Allow enough time for your commute on the first day. Remember to arrive early if instructed, for your first day orientation.

WORK ETHIC

The following are necessary in order to be successful while on assignment:

- ◇ Be reliable and prompt
- ◇ Be honest
- ◇ Have a positive attitude—be friendly, polite, and cooperative
- ◇ Follow the rules
- ◇ Do not use client's phone, email, or fax for personal reasons
- ◇ Ask questions when you do not understand something
- ◇ Respond positively to constructive criticism
- ◇ Take responsibility for your actions
- ◇ Give your best effort at all times
- ◇ Challenge yourself to be a continuous lifelong learner
- ◇ Keep our customers' work confidential

CONFIDENTIALITY

While on assignment, it is your responsibility to safeguard the confidential business information of the Client Company. Discussion pertaining to your work should never occur outside of the workplace.

AUTHORIZATION TO RELEASE INFORMATION

FurstStaffing is an equal opportunity employer. We are dedicated to a policy of non-discrimination in employment on any basis. We will not use the information provided on the application to discriminate against any individual with respect to his/her compensation, terms, conditions, or privileges of employment because of race, creed, color, age, sex, sexual orientation, religion, national or ethnic origin, political beliefs, veteran's status, physical or mental disability, or any other factor prohibited by applicable law.

Your application will be considered as current for a period of two years after it is filed. If you wish to be considered for employment after that period, you must submit a new application.

I understand that if I am hired, my employment will be for no definite period, regardless of the period of payment of my wages. I further understand that I have the right to terminate my employment at any time with or without notice, and the Company has the same right. No one other than the President of the Company has authority to modify this relationship or make any agreement to the contrary. Any such modification or agreement must be in writing.

I understand that the Company reserves the right to require me to submit to a drug test at any time and also reserves the right to require me to submit to an alcohol test and/or medical examination to the extent permitted by law.

I understand that the level of responsibility of certain job positions may require additional background information and in this case the Company has the right to obtain the necessary information. I understand that the Company may investigate my driving record, my educational record, my criminal record, and my credit history, and that an investigative consumer report may be prepared whereby information is obtained through personal interviews with neighbors, friends, and others with whom I am acquainted. This inquiry would include information as to my character, general reputation, personal characteristics, and mode of living. I understand that I have the right to make a written request within a reasonable period of time to receive additional detailed information about the nature and scope of this investigation. I hereby release all such persons from liability or damages incurred as a result of inquiry and furnishing the information.

I further understand that the Company may contact my previous employers, and I authorize those employers to disclose to the Company all records and other information pertinent to my employment with them. I also authorize the Company to provide truthful information concerning my employment with it to my future prospective employers, and I agree to hold it harmless for providing such information.

I certify that all of the information that I provide on this application and in any interview will be true and accurate. I understand that if I am employed and any such information is later found to be false or misleading in any respect, I may be dismissed.

DO NOT SIGN UNTIL YOU HAVE READ AND UNDERSTAND THIS STATEMENT

ACKNOWLEDGEMENT OF RECEIPT OF FURSTSTAFFING REFERENCE MANUAL

This is to acknowledge that I have received and reviewed the Employee Reference Manual and Hiring Criteria for FURSTSTAFFING. I understand that the Reference Manual outlines my privileges and obligations as an employee of FURSTSTAFFING.

I further understand that I am governed by the contents of the Employee Reference Manual and that it is my responsibility to familiarize myself with all information in it.

Since the information, policies, and benefits described in the Employee Reference Manual are subject to change, I understand and agree that such changes can be made by FURSTSTAFFING in its sole and absolute discretion, and I agree to observe these changes in all respects.

I understand that the statements in the Employee Reference Manual, as well as those in any other personnel material, which may be issued from time to time, and any statements which have been made to me, do not create a binding contract, and that my employment is for no set period and may be terminated at any time, with or without cause, and with or without notice, at the option of either FURSTSTAFFING or myself. I understand that no FURST employee, other than the owner, has the authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to this paragraph, and that, with respect to the owner, he/she may enter into such an agreement only if it is in writing and signed by him/her.

I understand FURSTSTAFFING requires employees to report their availability for work to our agency after their assignment has been completed. This is also in compliance with Title 56, Section 2865.115, Paragraph H of the Illinois Department of Unemployment. I further understand that if I fail to report my availability, Furst will assume that I am unavailable for work. This is an effort to keep me working as much as possible with little time lost between assignments.

JOB ASSIGNMENT INFORMATION

HIPAA AND THE MEDICAL COMMUNITY

The Health Insurance Portability and Accountability Act (HIPAA) establishes a set of national standards that assures that individuals' health information is properly protected, while allowing the flow of health information needed to provide and promote high quality health care. If you are placed on assignment at a medical facility, you will be required to abide by that facility's HIPAA regulations. Your Furst Representative will review these requirements, when appropriate, based on assignment.

COMMUNICATION

Communication is key to our mutual success. Contact us:

- ◇ If the assignment duties or skills required are different than what we explained to you
 - ◇ If you cannot report to work or will be late for any reason
 - ◇ If you feel the environment where you are assigned is unsafe
 - ◇ If you are injured while on assignment
 - ◇ If you are sent home due to lack of work
 - ◇ If you are moved from one department or shift to another
 - ◇ If you are asked to work on additional days per week other than originally specified
 - ◇ If you have any sort of conflict or problem on the job
 - ◇ If you are unhappy with something related to work
 - ◇ If you can no longer meet the requirements of the assignment
 - ◇ If your personal information changes such as name, address, phone number or withholding information
 - ◇ If you are offered full time work with the client company
- You will receive a follow-up call from us to ensure each assignment meets your expectations. You may also provide feedback to us by completing the Assignment Feedback Survey found on our website.

END OF ASSIGNMENT DETAILS

When you accept an assignment you are expected to complete it in a professional manner. You are required to contact us:

- ◇ If your assignment is extended or if it ends sooner than expected.
- ◇ If you choose to voluntarily quit the assignment. In this case, we require **as much notice as possible**, not less than completing your next scheduled shift. For example, if calling on a Friday, we would expect you to work the following Monday to fulfill the required notice.
- ◇ If you left any personal belongings at the job site. FurstStaffing will retrieve items for you. Note: It is not acceptable for you to return to the Client Company property, or to call the client directly, once your assignment has ended for any reason.
- ◇ If you have requested your file be inactivated due to unavailability for any reason (i.e. accepted another job, ill, on vacation, etc.) You must call and speak directly with a Furst representative to reactivate your file once you become available again. DO NOT leave a message on the Availability Line.

PAYROLL INFORMATION

As your employer, we pay you on a weekly basis. There is never a cost to you for your assignment. The only deductions from your pay are what is required by local, state, and federal laws for social security and tax withholdings. We pay Unemployment Compensation insurance as well as cover you with Workers' Compensation insurance.

EARNINGS/WAGES

Your hourly wage is based on the skills required for each assignment and **should only be discussed with your Furst Representative.** You will be paid time-and-one-half for hours worked over 40 in one work week.

PAY PERIOD/WORK WEEK

Our regular pay period runs Monday through Sunday. Some clients require assignment pay periods to match theirs. Your Furst Representative will inform you of any variance when offering a position.

TIME SLIPS

You are responsible for completing and returning your time slip each week. Without the signed, completed time slip in our office by 5:00 PM on Monday, we will not be able to pay you until the following week.

- ◇ Time slips **must be turned in signed by your Client Supervisor**
- ◇ Time slips **must be in our office as early as possible, no later than 5:00 PM on Monday, in order to be paid that week.** Your time slip can be put in our drop-off slot to the right of our front door if our office is not open
- ◇ Time slips received after the deadline will be processed the following week
- ◇ A new time slip will be enclosed with each paystub
- ◇ A new time slip must be used for each new assignment and at the beginning of each week
- ◇ If you fax your time slip into FurstStaffing, place a follow up call to our payroll department at the main office to verify that it was received
- ◇ If you are authorized to call your hours in, **YOU MUST PRESENT YOUR TIME SLIP, SIGNED BY THE CLIENT SUPERVISOR, WHEN YOU PICK UP YOUR PAYCHECK**
- ◇ If you lose your time slip, you may print one out from our website. Be sure to have our client retain a copy

Note: Alternate arrangements for reporting your time have been made with some Client Companies. Any changes in reporting your time to us will be explained to you in advance of your assignment by your Furst Representative. **Please verify this time slip procedure when accepting a new assignment.**

ACKNOWLEDGEMENTS & AUTHORIZATIONS

For your reference the following pages contain copies of the documents you will be asked to sign:

- ◇ **Acknowledgement of Receipt of FurstStaffing Reference Manual** *Included in your application paperwork and signed during registration*
- ◇ **Authorization to Release Information** *Included in your application paperwork and signed during registration*
- ◇ **Acknowledgement of Safety Awareness and Injury Procedures** *Included in your application paperwork and signed during registration*
- ◇ **HIPAA Authorization Release of Drug/Alcohol Test Results** *Included in your application paperwork and signed during registration*
- ◇ **Acknowledgment of Receipt of Drug-Free and Alcohol-Free Workplace Policy** *Signed prior to pre-employment drug test*

YOUR RIGHTS UNDER THE FAMILY AND MEDICAL LEAVE ACT OF 1993

- For care of a member of Armed Forces, National Guard, or reserves that is a spouse, son, daughter, parent or next of kin up to 26 workweeks of unpaid leave in a 12 month period

At the employee's or employer's option, certain kinds of paid leave may be substituted for unpaid leave.

Advance Notice and Medical Certification

The employee may be required to provide advance leave notice and medical certification. Taking of leave may be denied if requirements are not met. The employee ordinarily must provide 30 days advance notice when the leave is foreseeable.

An employer may require health care provider certification to support a request for leave because of a serious health condition. An employer may also require second or third opinions (at the employer's expense), and periodic recertification of a serious health condition. An employer may have a uniformly-applied policy requiring employees returning from leave for their own serious health condition to submit a certification that they are able to resume work.

Job Benefits and Protection

For the duration of FMLA leave, the employer must maintain the employee's health coverage under any group health plan.

Upon return from FMLA leave, most employees must be restored to their original or equivalent positions with equivalent pay, benefits, and other employment terms.

The use of FMLA leave cannot result in the loss of any employment benefits that accrued prior to the start of the employee's leave.

Because of the nature of our business, it is understood that a FurstStaffing employee may be unable to return to the same assignment or location as when the leave began.

Unlawful Acts By Employers

FMLA makes it unlawful for any employer to interfere with, restrain, or deny the exercise of any right provided under FMLA. It is unlawful to discharge or discriminate against any person for opposing any practice made unlawful by FMLA or for involvement in any proceeding under or relating to FMLA

Enforcement

The U.S. Department of Labor is authorized to investigate and resolve complaints or violations. An eligible employee may bring a civil action against an employer for violations.

FMLA does not affect any Federal or State law prohibiting discrimination or supersede any state or local law or collective bargaining agreement which provides greater family or medical leave rights.

FOR ADDITIONAL INFORMATION

Contact the Wage and Hour Division, 1-866-487-9243 or at the website <http://www.wagehour.dol.gov>.

PAYROLL INFORMATION

HOW TO FILL OUT THE TIME SLIP

- PRINT your name, last four digits of your Social Security Number, week-ending date, Client Company name, Company address, and the name of person to whom you report. Please print this information clearly or it may cause a delay in your pay.
- Record the dates worked and total of each day's hours (minus lunch time.)
- Draw a line through any days not worked.
- Record week's total hours; regular and overtime.
- Sign and date the time slip.
- Have Client Company supervisor sign the time slip. (We cannot pay for hours worked without this signature.)
- The yellow copy is given to your supervisor, the white copy is sent to our office, the pink copy is for you to keep.
- Authorization for a person other than yourself to pick up the check is on back of the pink copy.

EMPLOYEE <u>Jane Doe</u>		SOC. SEC. # <u>XXX-XX-6789</u>		WEEK ENDING <u>4-18-04</u>	
COMPANY <u>ABC Company</u>		ADDRESS <u>303 Main St.</u>		Time slip must be received in our office by Monday 5 p.m.	
		REPORTS TO <u>Bob Johnson</u>			
	DATE	TIME STARTED	TIME FINISHED	PAUSE (LUNCH/REST)	TOTAL HOURS
MONDAY	<u>4-12</u>	<u>7:00</u>	<u>3:30</u>	<u>.5</u>	<u>8</u>
TUESDAY	<u>4-13</u>	<u>7:00</u>	<u>3:30</u>	<u>.5</u>	<u>8</u>
WEDNESDAY	<u>4-14</u>	<u>7:00</u>	<u>3:30</u>	<u>.5</u>	<u>8</u>
THURSDAY	<u>4-15</u>	<u>7:00</u>	<u>3:30</u>	<u>.5</u>	<u>8</u>
FRIDAY	<u>4-16</u>	<u>7:00</u>	<u>3:30</u>	<u>.5</u>	<u>8</u>
SATURDAY	<u>4-17</u>	<u>7:00</u>	<u>12:00</u>		<u>5</u>
SUNDAY					
TOTAL HOURS FOR WEEK (DO NOT REPEAT 1/10)					<u>45</u>

REGULAR		OVERTIME
<u>40</u>	<u>5</u>	

FurstStaffing

1. I certify that I have worked the hours listed on this time sheet and have sustained no injuries.
Employee Jane Doe Date 4-18-04

2. I certify that the above employee worked the hours listed on this time sheet, and that I have READ and ACCEPT the terms and conditions on the reverse side of the client copy.
Client Bob Johnson Date 4-18-04

This is a self-mailer. No envelope required. Stamp and mail immediately upon completion of assignment or at the end of each week.
Canary Copy - Client White Copy - Furst Pink Copy - Employee

PAY DAY

We encourage direct deposit as the preferred method of pay. It is available once you complete the Direct Deposit form, available in our office or on our website. You will be informed of any exceptions to the payday schedule.

- ◇ If you work out of the Rockford office, your money will be in your account on Wednesday.
- ◇ If you work out of the Darlington, DeKalb, or Stockton office, your money will be in your account on Thursday.
- ◇ If you work out of the Chicago office, your money will be in your account on Friday.
- ◇ During holiday weeks, payday may be one day later than usual.
- ◇ Your direct deposit stub with all of your payroll information is provided to you. Please retain this stub for your records. You may be charged a fee for requesting copies.

If you are unable to participate in direct deposit, you will be paid via check. Your Furst Representative will inform you of your assignment's payday. Commonly checks are available after 2pm on Tuesday.

- ◇ Holidays may affect the pick-up date for paychecks.
- ◇ You must have a picture ID to pick up your paycheck.
- ◇ Paychecks not picked up by 5:30 PM are promptly mailed to your home address. It is important we have your full mailing address, including apartment number, and ZIP code. Notify FurstStaffing of any changes in address or phone number immediately.

PAYROLL INFORMATION

- ◇ A friend or relative may pick up your paycheck provided they bring signed authorization from you to this effect. The back of the pink copy of the time slip is the form to use for this authorization. The person picking up the check must bring his/her own picture ID.
- ◇ Paychecks may also be held at the office upon your written request.
- ◇ Please retain your paystub for your records. You may be charged a fee for requesting copies.

BENEFITS

HOLIDAY PAY

You will receive holiday pay for the following holidays if you have worked at least 760 hours in the 21 weeks prior to the holiday and have worked the full scheduled work day before and after the holiday.

APPRECIATION PAY

You will receive appreciation pay once you have worked for Furst for 1000

- | | |
|------------------------|--------------------|
| ◇ New Year's Day | ◇ Labor Day |
| ◇ Memorial Day | ◇ Thanksgiving Day |
| ◇ July 4 th | ◇ Christmas Day |

hours. Appreciation pay will be in the amount of \$75.00, and will be paid to you automatically when you qualify. For each 500 hours you work after the first 1000 hours, you will receive appreciation compensation pay in the amount of \$75.00.

Benefit hours will reset to zero after a gap in service of 6 weeks.

MEDICAL INSURANCE

FurstStaffing is happy to offer medical insurance to our employees. If you elect to have the coverage, you will also have the option to select other benefits, including:

401(K) PROFIT SHARING PLAN

- | | |
|----------|-------------------------|
| ◇ Dental | ◇ Short Term Disability |
| ◇ Vision | ◇ Term Life Insurance |

A 401(K) Profit Sharing Plan for FurstStaffing employees is available for those who qualify. Employees are notified bi-annually when they first become eligible. Enrollment meetings are held twice a year – you may attend and enroll at any of these meetings after your initial eligibility. You will be eligible to participate in the plan if you have completed one year of service, which is defined as:

- ◇ 12 consecutive months of employment with Furst
- ◇ You have been credited with 1,000 hours of service by the end of your first 12 consecutive months of employment
- ◇ You are 21 years of age or older

RULES OF CONDUCT

- production output; i.e. exhibiting lack of effort, wandering from your work station, sleeping on the job.
8. Insubordination. Refusal to follow reasonable direction given by your supervisors or lead personnel.
 9. Failure to comply with established Manufacturing Practices.
 10. Theft or dishonesty, for example:
 - Punching another employee's time card;
 - Falsification or forgery of time slip;
 - Falsification of Client Company work records;
 - Theft or removal of any article belonging to Client Company or another employee without approval from appropriate manager;
 - Making long distance or toll calls on Client Company telephone
 11. Divulging trade secrets or proprietary information.
 12. Willfully or negligently misusing, damaging, or removing property belonging to the Company, other employees or vendors.
 13. Falsification and/or omission on employment application.
 14. Engaging in horseplay, running, fighting (physical assault), or other disturbances on Company property.
 15. Smoking – when or where prohibited.
 16. Soliciting for any purpose during working hours or soliciting other employees while they are working.
 17. Use of profane, abusive, indecent, or threatening language or actions toward fellow employees or management.
 18. Unauthorized return to Client Company property after assignment has ended.
 19. Indictment/conviction for outside criminal activities.
 20. Carrying or possessing firearms, explosives, or other lethal weapons on company property.

YOUR RIGHTS UNDER THE FAMILY AND MEDICAL LEAVE ACT OF 1993

THE LAW

FMLA requires covered employers to provide up to 12 weeks of unpaid, job-protected leave to "eligible" employees for certain family and medical reasons. Employees are eligible if they have worked for a covered employer for at least one year, and for 1,250 hours over the previous 12 months, and if there are at least 50 employees within 75 miles.

Reasons For Taking Leave

Unpaid leave must be granted for any of the following reasons:

- To care for the employee's child after birth or placement for adoption or foster care
- To care for the employee's spouse, son or daughter, or parent, who has a serious health condition
- For a serious health condition that makes the employee unable to perform the employee's job
- For qualifying exigencies arising out of the fact that the employee's spouse, son, daughter, or parent is on active duty or called to active duty status as a member of the National Guard or Reserves in support of a contingency operation

COMPUTER RESOURCE POLICIES AND GUIDELINES

- ◇ Copyrighted material may not be duplicated or used in any way that violates the copyright.
- ◇ Downloading or uploading of software protected by a license agreement may only be done in strict compliance with the license agreement and must have prior approval of a company-authorized system professional.
- ◇ Adherence to Company policies related to virus scanning, downloading, and uploading files or attachments is required.
- ◇ Employees may not use the Internet/Intranet or e-mail systems for personal gain or non-Company solicitations.

To assure compliance with this and other Company policies, the Company expressly reserves the right to access, retrieve, read, and/or delete any communications or other documents that are created, received, sent, or stored via Internet/Intranet or e-mail systems.

Any employee who becomes aware of misuse of the Internet/Intranet or e-mail systems should promptly report the matter to a Furst Representative.

CELL PHONES AND ELECTRONIC DEVICES

The use of personal cell phones or any electronic devices, such as iPods, Blackberries, etc., while at work may contribute to unsafe conditions, and create a distraction in the workplace. Using electronic devices to phone, text, email, or browse the web during paid work time is unacceptable. You are required to follow the policy of the Client Company where you are assigned regarding cell phone/electronic device usage during your break time. Confirm this policy with your FurstStaffing representative before starting each new assignment.

RULES OF CONDUCT

Rules of conduct must be maintained in order to protect the rights, safety, and welfare of all employees. Furst and our Client Companies use reasonable, common sense rules of conduct to ensure the mutual welfare of the Company and its employees. You are required to observe the following list of rules of conduct at all times when on assignment.

The following actions are **unacceptable** and may result in disciplinary action, up to and including release from assignment and termination from FurstStaffing. This list is not all-inclusive and any questions regarding specifics should be discussed with a Furst Representative.

1. Failure to work in a positive, courteous, and cooperative manner.
2. Failure to comply with Furst's Attendance Call-In Policy on page 10, or to notify Furst in a timely manner when required, as noted throughout this Reference Manual.
3. Failure to adhere to any of the policies outlined in this reference manual.
4. Failure to report an injury promptly.
5. A No Show/No Call for a scheduled shift.
6. Violation of Client Company rules and policies.
7. Failure to meet quality standards or levels of efficiency by restricting

BENEFITS

SKILLS ENHANCEMENT

It is to your advantage to learn new skills to be eligible for higher paying positions. Furst provides computer software training, receptionist training, and industrial skills training to qualified applicants and employees. There is no charge to our employees after 200 working hours have been accrued. Call our office for more details about how you can qualify.

EMPLOYEE RECOGNITION PROGRAMS

Furst offers periodic and seasonal promotions to our employees as a way of saying "Thank You" for your hard work.

REFERRAL BONUS PROGRAM

You can earn from \$20 dollars to \$100 dollars depending on the level of the candidate referred. The bonus amount is determined by the skill of the first position accepted. Remember, if a client hires you or you are not currently on assignment, you are **STILL ELIGIBLE** to receive bonus checks for the people you refer.

UNEMPLOYMENT INSURANCE

Unemployment insurance is a state-operated program under which you are entitled to benefit payments while you are unemployed if you meet the legal requirements. Benefits are financed solely by employers' payroll taxes—not by any deductions from your wages. The program is administered at the state level.

TO QUALIFY FOR BENEFITS

Your unemployment must be involuntary. You may be disqualified from collecting unemployment if you:

- ◇ Quit your assignment voluntarily without good cause attributable to your employer
- ◇ Were discharged for misconduct in connection with your work
- ◇ Were discharged for a felony or theft in connection with your work
- ◇ Are out of work because of a labor dispute
- ◇ Are unavailable or unable to work

You must be actively seeking work, and willing to accept any suitable job offered.

REQUIREMENTS

If you are collecting unemployment insurance while you are between assignments with FurstStaffing, you are required to call in **at least once per week** to advise us of your availability, or we will assume that you are not available for work that week.

Pamphlets explaining these benefits in more detail are available in our office.

ATTENDANCE and TIME OFF

Punctuality and reliability are key to your success. The companies we work with know that Furst employees are the best! They are quality minded and reliable.

ATTENDANCE CALL-IN POLICY

- ◇ If you must be absent, late, or if you work a partial shift because of an illness or an emergency, you are REQUIRED to contact Furst as soon as possible, and before the start of your shift. When the Client Company you are assigned to requires a phone call – be certain to make the additional call.
- ◇ When Furst is closed, call (815) 229-7810 and leave a message on our voice mail system (available 24 hours), then call the Client Company direct. Include the following information:
 - First and Last Name - Reason for absence or tardy
 - Social Security number - Company Name
 - Phone number - Shift and Supervisor
- ◇ In ALL cases, anytime you miss work or do not COMPLETE your scheduled shift—this includes if approved to leave or if sent home due to lack of work—you are required to notify Furst.

DEFINITIONS

Occurrence

- ◇ Any amount of time that you did not work a complete scheduled shift

Excused

- ◇ When you are ill or faced with an emergency situation and are unable to make it to your shift and you follow the required Call-In Policy
- ◇ When you request time off for a pre-scheduled necessary appointment, with a minimum notice of 24 hours

Unexcused

- ◇ When you work a partial shift or are absent from work without following the required Call-In Policy
- ◇ When explanation for occurrence is not considered compelling and excusable. Excusable occurrences commonly require documentation to substantiate explanation

Excessive

- ◇ Three (3) occurrences within a three-month period

NO LEAVE-OF-ABSENCE POLICY

If you require time off for more than three (3) consecutive days, not covered under the Family and Medical Leave Act, you may want to consider the option of quitting the assignment in order to maintain a good attendance record.

NON-HARASSMENT POLICY

Complaints of harassment will be investigated. Investigation may include:

- ◇ Getting the facts from all parties involved, including witnesses
- ◇ Documenting all steps, discussions, and witnesses' statements
- ◇ Confronting the alleged harasser with the charge
- ◇ Sharing results of the investigation (not the disciplinary action)
- ◇ No reprisal or retaliation will take place

Confidentiality

- ◇ During the conflict resolution process, care will be taken to keep the matter confidential. It will be maintained as long as you do not talk openly about your situation.
- ◇ The nature of your problem may need to be shared with select managers.
- ◇ Your Furst Representative will advise you about steps for action and will work to ensure that you understand your options concerning confidentiality.

Employees who have questions concerning this policy should contact the President of FurstStaffing at (815) 229-7810, for a confidential discussion.

COMPUTER RESOURCE POLICIES AND GUIDELINES

The following policies refer to all Client Company Internet/Intranet and email systems where you are assigned. Failure to abide by these policies may result in disciplinary action, up to and including termination.

- ◇ Internet/Intranet and e-mail systems are for business purposes only. Non-business and unauthorized use of computer resources is prohibited.
- ◇ Employees receiving Company-related communications over the Internet/Intranet or e-mail systems shall disclose information to authorized parties only.
- ◇ Employees do not have a personal privacy right in any communications or other documents they create, receive, send, or store. The Company reserves the right, at its discretion, to monitor and otherwise address any communications or other documents created, received, sent, or stored.
- ◇ The Company's policy against sexual or other harassment applies to all Company communication systems. Creating, transmitting, or intentionally receiving communications or other documents that are intimidating or that contain hostile, degrading, or otherwise offensive references to people based on their sex, race, creed, political beliefs, veteran's status, nationality, religion, age over 40, color, physical or mental disability, status, sexual orientation or any other factor prohibited by law violates Company policy.
- ◇ Attempting to access erotic or sexually-oriented sites is prohibited. This includes any site containing offensive language or any other content prohibited by law, regulations, or Company policy.
- ◇ Political statements not sanctioned by the Company are prohibited.
- ◇ Playing games on Company computers is considered non-business usage and is prohibited.

NON-HARASSMENT POLICY

FurstStaffing has established a strict policy prohibiting unlawful harassment of employees, including implied or expressed forms of sexual harassment. It is FurstStaffing's policy that all employees are responsible for assuring that the workplace is free from harassment. FurstStaffing considers harassment to be a major offense that may result in substantial disciplinary action, up to and including termination.

HARASSMENT TERMS

Harassment

Behavior that is unwelcome, degrading, and/or personally offensive. It debilitates morale and therefore interferes with work effectiveness. It can result in creating an environment that is intimidating, hostile, or offensive to a co-worker.

Sexual Harassment

Unwelcome sexual advances, requests for sexual favors, and/or other verbal or physical contact of a sexual nature. Such conduct constitutes sexual harassment when:

- ◇ It is an employment condition; or
- ◇ It is an employment consequence; or
- ◇ It creates a degrading, hostile work environment

Unwelcome Behavior

Advances that are not welcome, have not been invited and/or are not appreciated whether verbal or non-verbal.

- ◇ Things change: Behavior that was accepted last week may not be accepted this week
- ◇ It may be selective: What may be welcome for one, is unwelcome for another

Verbal and Non-Verbal Harassment

Remarks, suggestive comments, jokes, insults, threats, noises (including whistles) and/or any conversation that is hostile, degrading, sexual and/or offensive.

Physical Harassment

Offensive, and/or suggestive touching, pinching, brushing the body, posturing, staring, or gesturing.

Hostile Work Environment

An environment that is intimidating, offensive, threatening and/or antagonistic. This type of environment debilitates morale and interferes with work effectiveness.

HARASSMENT COMPLAINT

Procedure

If you find yourself in an uncomfortable situation and believe you are being harassed:

- ◇ Let the person know you are uncomfortable and make it clear you wish him/her to stop the behavior
- ◇ Speak to your Furst Representative who will work with the Client Company to resolve the issue

ATTENDANCE and TIME OFF

REQUEST FOR TIME OFF

Time off requests should be kept to a minimum. If you have plans/appointments that cannot be scheduled outside of your scheduled working hours, check with your FurstStaffing Assignment Manager for approval, as procedures vary based on the client company where you are assigned. Regardless of where you are assigned, you are required to give as much notice as possible to both Furst and the Client Company—not less than a 24-hour working shift notice.

If the time off request is not approved, you will be required to work your scheduled shift. If you opt to take the time off regardless of approval, the time off will be recorded as an attendance occurrence. Approved time off will not affect your attendance record.

LACK OF WORK

There may be times when the Client Company has lack-of-work for various reasons. When this happens at the start of your shift, you may be given the option to stay and work (typically duties that may not be your regular job) or you may volunteer to leave. When you volunteer to leave, you waive your four-hours of show up pay. Opting to go home in this situation will not be counted as an attendance occurrence.

IMPORTANT POINTS

- ◇ Early attendance occurrences may cause immediate release from assignment
- ◇ Failing to be at your work station ready to work at the start of your shift is considered a tardy occurrence
- ◇ Failing to respect lunch and break times by returning late are considered tardy occurrences
- ◇ Leaving your work station before shift has ended is considered an early departure occurrence
- ◇ **A no show, no call to a scheduled shift may warrant immediate termination**
- ◇ Documentation and/or Physician's excuses or authorization to return to work may be required
- ◇ An extended illness of more than 2 consecutive days will require documentation
- ◇ Even if absences are "excused" the client company may still request release from assignment due to their production needs

DRUG-FREE AND ALCOHOL-FREE WORKPLACE POLICY

This policy is designed to enhance our company's safety program and create a suitable work environment for all employees. The policy covers internal staff, temporary, and Furst-to-hire employees assigned to all client locations serviced by our Rockford operation.

It is not our intent to intrude into the private lives of our employees. Our objective is to have all employees report to work in a condition to perform their duties safely and efficiently. The presence of alcohol and other drugs and the influence of these substances on employees during working hours is inconsistent with our objective.

Any questions with respect to this policy should be directed to your FurstStaffing Representative.

TESTING

Employees and/or applicants for employment with the company shall be subject to drug and/or alcohol testing under the circumstances set forth below:

Pre-Employment

As a condition of employment with FurstStaffing, Rockford operation, all offers of employment will be contingent upon negative results of the pre-employment drug screen.

Reassignment

Employees will be drug tested each time they accept a new job assignment unless they have been tested within twelve (12) months of the date of placement. Note, some Client Companies require more recent testing.

Post-Accident/Incident

Drug and alcohol testing will be required when:

- ◇ An employee is involved in a work-related accident requiring treatment at a medical facility
- ◇ An employee is involved in a work-related accident that leads to the injury of others
- ◇ An employee is involved in a work-related incident causing property damage

Testing shall occur as soon as possible after the accident/incident. It is the responsibility of employees to identify themselves as Furst employees and to inform the medical facility of the drug and alcohol test requirement at the time of treatment.

Refusal to take the test or positive results may result in termination and loss of Workers' Compensation benefits. Any employee who tests positive may be responsible for the cost of the medical treatment administered. All testing and test results will be kept confidential, except where required by law to divulge such information.

Reasonable Suspicion

Reasonable suspicion is a belief based upon objective considerations that would lead a prudent person to suspect that an individual is under the influence of drugs or alcohol. Such a determination will be made by the individual's site supervisor and/or a Furst Representative. Suspicion may be validated based on observations by fellow employees or supervisory/lead personnel which indicate behaviors or actions which deviate from the employee's normal or usual behavior. Refusal to

WORKERS' COMPENSATION

Illinois Workers' Compensation laws are state statutes that establish liability of employers for injuries to workers while on the job, or illnesses due to employment, and require insurance to protect the workers. The laws provide for payment of medical bills resulting from treatment due to these injuries or illnesses and reasonable income benefits for employees who may lose time from work.

Workers' Compensation is available for injuries when the following conditions are met:

- ◇ Injury must be accidental
- ◇ Injury must be work related
- ◇ Injury must be medically verified

FurstStaffing is a modified duty employer.

FRAUDULENT CLAIM

FurstStaffing maintains a zero tolerance position towards fraudulent Workers' Compensation claims.

Workers' Compensation fraud costs businesses millions of dollars each year in lost earnings, lost productivity, and higher insurance premiums. Fraud also hurts employees because an employer's losses can threaten jobs and even arouse suspicion when a real injury occurs.

If it is determined that an employee has provided false information to FurstStaffing, the physician, or the compensation carrier for the purpose of fraudulently obtaining Workers' Compensation, we will prosecute to the fullest extent of the law.

FRAUDULENT CLAIM REWARD

FurstStaffing offers a \$200 cash reward to anyone who reports knowledge of a false claim made by a FurstStaffing employee. The knowledge shared must enable FurstStaffing to file charges of fraud or must lead to the dismissal of the claim.

JOB INJURY

PROCEDURE

If you are injured on the job, you are required to follow these steps:

- ◇ Report the accident to your job site supervisor at once. If necessary, get First Aid promptly.
- ◇ **Report the injury to FurstStaffing within one hour of the injury no matter how minor the injury seems.**
- ◇ If needed, obtain medical care from a qualified doctor, clinic, or hospital. If you receive medical care, be sure to list FurstStaffing as your employer – not the Client Company.
- ◇ Unless it is an emergency situation, you are required to complete the Employee Injury Illness Statement included in this booklet immediately upon reporting an injury.

In accordance with FurstStaffing's Drug-Free and Alcohol-Free Workplace Policy, you are required to be tested for drugs of abuse and alcohol when you receive treatment for your injury. **It is your responsibility to inform the medical facility of the test.** You will need to provide identification to the testing facility.

Failure to report an injury promptly may result in disciplinary action up to and including release from assignment and termination from FurstStaffing.

Any employee working for FurstStaffing who has witnessed or sustained an injury is required to report it immediately to both their job site supervisor and to FurstStaffing.

FurstStaffing desires to provide our injured employees with the most expedient and quality medical care for their work related injuries. We provide a modified duty program that allows our injured workers to return to work by making accommodations for work restrictions.

If your injury requires time lost from work, you are responsible for keeping us informed of your progress. You are required to provide FurstStaffing with a "Return-To-Work" status report signed by your doctor immediately after each visit.

When you have been advised by the doctor that you have been released to modified duty, you are required to contact any FurstStaffing Manager within 24 hours to set up your work schedule at the Client location in which your injury occurred or at the local FurstStaffing office.

DRUG-FREE AND ALCOHOL-FREE WORKPLACE POLICY

take the test or positive results may result in termination. A pre-approved check list will be utilized to record signs, conditions, or behaviors that support the suspicion that the person is under the influence of drugs or alcohol at work. In determining whether reasonable suspicion of abuse exists, supervisors may consider factors including, but not limited to, the following:

- ◇ Direct observation of drug or alcohol use or possession and/or symptoms of being under the influence of drugs or alcohol
- ◇ A pattern of aberrant or abnormal behavior, such as mood and behavior swings and wide variations or changes in job performance
- ◇ Arrest or conviction of a drug-related offense or identification of an employee as the subject of a drug-related criminal investigation
- ◇ Information provided by a reliable and credible source(s)
- ◇ Newly discovered evidence that an employee tampered with a previous test

Results

FurstStaffing will take disciplinary action on a confirmed positive test result, or refusal to take the test. Disciplinary action shall be determined by Furst, up to and including termination of employment.

Some Client Companies of FurstStaffing require confirmation of drug/alcohol test results. The employee's signature on the HIPAA and Drug/Alcohol Policy acknowledgment forms authorizes Furst to release the results to necessary personnel (see acknowledgement on page 31 & 32). In the case of post-accident testing, the FurstStaffing Risk Manager and our workers' compensation carrier will be notified. In the event of termination, state unemployment authorities may also be notified of the results.

CLIENT COMPANY PRE-EMPLOYMENT REQUESTS

In the event a client requests a Furst employee to submit to a drug or alcohol test, that Client Company is authorized to release those results to FurstStaffing (see acknowledgements on page 31 & 32). If an employee refuses to submit to the drug and/or alcohol test, FurstStaffing may request the employee to drug and/or alcohol test in accordance with the Reasonable Suspicion clause.

AUTHORIZED USE OF PRESCRIBED MEDICINE

Any employee who is taking a prescription or over-the-counter drug which may cause drowsiness or any other side effects must report this to his/her FurstStaffing Representative. A determination will be made as to whether the Company should temporarily change the employee's job assignment during the period of treatment. Employees should keep all prescribed medicine in the original container that identifies the drug, date of the prescription, and prescribing doctor. The use of another person's prescription medicine constitutes illegal use of drugs.

PROHIBITED CONDUCT

Any violations of this policy will be treated as a very serious matter. Individuals who are found to have violated this policy will be terminated unless the Company determines, in its sole discretion, that sufficient mitigating circumstances exist to avoid termination. In such instances, the

DRUG-FREE AND ALCOHOL-FREE WORKPLACE POLICY

Company shall determine the appropriate discipline to be given to the involved employee.

Consistent with the purpose of this policy, conduct that is prohibited by the Company includes, but is not limited to, the following:

1. The use, manufacture, distribution, dispensation, possession, or sale of illegal drugs, inhalants, or alcohol while on Company premises, while on Company business, while in Company-supplied vehicles, or during working hours
2. Being "under the influence" ("under the influence" for purposes of this policy is testing positive for the use of illegal drugs, inhalants, and/or alcohol at a level determined by the Company's testing laboratory) of illegal drugs, inhalants, or alcohol while on Company premises, while on Company business, while in Company-supplied vehicles, or during working hours
3. Possession, use, manufacture, dispensation, or sale of illegal drugs, inhalants, or the use of alcohol, off Company premises that adversely affects the individual's work performance, the safety of the employee, or other employees at work, or the Company's reputation in the community
4. Refusing to consent to testing required by this policy or switching or altering any specimen submitted for such testing
5. Failure to report to the Company the use of a prescribed drug which may alter the employee's physical or mental ability
6. Refusing to sign a statement agreeing to abide by the Company's Drug-Free and Alcohol-Free Workplace Policy
7. The use of another person's prescription medication
8. Any other violation of the provisions of this Policy

SAFETY

WE ARE SERIOUS ABOUT YOUR SAFETY

Your safety is a prime concern of FurstStaffing. The company you are assigned to makes every effort to keep your work area safe and free from hazards. You must be aware of basic safety measures and proper reporting procedures. Safety is the responsibility of everyone. Failure to abide by the policies outlined in this book, or established at your work site may result in release from assignment and/or termination from FurstStaffing. The following is a list of several safety rules and may not be all inclusive.

SAFETY RULES & REGULATIONS

1. Exercise common sense and good judgment at all times.
2. Observe all applicable safety rules and signs.
3. Always wear appropriate safety attire as required.
4. Report all unsafe conditions to your supervisor immediately.
5. Remain attentive to work at all times when in production area.
6. Running, horseplay, and fighting are strictly forbidden.
7. Use safe lifting practices and plan your lifts. Avoid twisting and never lift or move more than your physical ability allows. Ask for help.
8. Always use the right tools for the job. Use them safely and only when authorized.
9. All machine guards and safety devices must be in place and working whenever machinery or equipment is operated. NEVER put your hands into moving machinery. Do not operate any equipment that is not in safe condition.

JOB SAFETY & HEALTH PROTECTION FOR PUBLIC EMPLOYEES LAW

For a list of toxic substances, a copy of the act, a listing of employer, manufacturer, supplier, importer and Illinois Department of Labor responsibilities, or to file a complaint, contact the Illinois Department of Labor.

910 South Michigan
Chicago, IL
312/793-2800

OR

100 North First
Springfield, IL
217/782-4102

HOW THIS LAW AFFECTS A TEMPORARY WORKER

1. As your employer, FurstStaffing wants to make you aware of the law and orient you on Material Safety Data Sheets and warning labels. It is impossible for us to know every chemical used in every customer's business, so we have let our customers know they have an obligation to inform you about what chemicals are used in their businesses and how you should deal with them once you are on their premises.
2. Many of you will be sent on clerical jobs where there are few, if any, chemical hazards that you will come in contact with. If you have any questions about chemical hazards, please call your FurstStaffing Representative immediately.
3. If you are sent out on an industrial job where you might come in contact with any hazardous chemicals, your job site supervisor will orient you on that company's Hazardous Chemical Program upon your arrival. Always find out where the Material Safety Data Sheets are located.
4. If you change job sites on a customer's premises, be sure to ask if you will be in contact with any new chemicals. Also, learn the location of the Material Safety Data Sheets.
5. If you are new on the job, and you are not given chemical hazard orientation immediately, be sure and ask for it. Never work with any liquid, dry, or granulated materials that have a hazard warning label until you know how to handle that product safely. Read the Material Safety Data Sheets or ask your job site supervisor.
6. It is your responsibility to follow all written chemical hazard programs for your own safety as well as for the safety of others.
7. Remember – What you don't know can hurt you! So, ask your on-site supervisor or contact a Furst Representative.

JOB SAFETY & HEALTH PROTECTION FOR PUBLIC EMPLOYEES LAW

The Job Safety & Health Protection for Public Employees Law is for Your Safety!

EMPLOYEE RIGHTS

1. You have a right to information about toxic substances at your workplace. The law specifies a number of ways for this information to be provided to you by your employer.
 - A poster in an accessible location.
 - Material Safety Data Sheets (MSDS.) Copies must be made available to employees, their designated representatives, and their treating healthcare professional within 10 days of a written request.
 - Annual training to routinely exposed employees. Transferred employees must be trained prior to beginning their new work assignment.
 - Containers of toxic substances must be labeled with the chemical name(s) and appropriate hazard warnings. Fixed containers within a workplace need not be labeled, but the required information must be available in the employee's work area. Under certain circumstances, mixtures of toxic substances may be labeled with the trade name.
2. You may refuse to work with a substance on the toxic substance list if your employer has not supplied you with a Material Safety Data Sheet after you requested it in writing, and if your employer has not made a good faith effort within a designated time limit to get the Material Safety Data Sheet from the supplier or manufacturer.
3. You may not be discharged or otherwise disciplined or discriminated against in any manner by an employer for exercising your rights under the law.
4. If you believe you have been denied your rights under the law, you (or your representative) may file a complaint with the Illinois Department of Labor.
5. You may petition the Illinois Department of Labor to make additions to the toxic substance list. The Illinois Department of Labor will consider any such requests annually at a public hearing.
6. Your representatives are entitled to specific Material Safety Data Sheets in possession of your employer within 10 days of written request.
7. Your personal physician is entitled to receive, upon written request to the employer, any Material Safety Data Sheets in the employer's possession, regardless of whether or not the substance is on the toxic substance list.

The law does require employees to be informed of toxic substances in their workplace. The Federal Occupational Safety and Health Act (OSHA) does require that your employer provide a safe and healthy working environment. Injuries and illnesses caused by toxic substances in the workplace may be covered by the Illinois Workers' Compensation Act and the Illinois Occupational Diseases Act.

SAFETY

10. Keep alert to mechanized traffic. Although pedestrian traffic has the right-of-way, you are requested to move out of the way of motorized vehicles allowing them to pass
11. Do not operate any motorized vehicle, (forklift, etc.) that belongs to the company without pre-authorization from FurstStaffing. Once authorized and properly trained, forklifts and other power equipment should be operated in a safe manner.
12. Always keep your work area clean and orderly. Aisles and exits must be kept clear at all times.
13. To reach areas above you, always use a step stool. Never stand on stacked pallets, chairs, boxes, or other makeshift platforms.
14. Do not wear loose-fitting or torn garments around machinery. Cuffs or long sleeves must be kept buttoned at all times unless rolled above the elbow. Sleeve covers and gloves are to be worn around hot equipment.
15. Understand the Job Safety & Health Protection For Public Employees Law. MSDS (Material Safety Data Sheets) are available as required by OSHA.
16. Drive slowly in the parking lots; speeding or reckless driving is prohibited.

SAFE LIFTING PRACTICES

The following is a ten step checklist for safe lifting practices:

1. Size up the load
2. Use gloves if necessary
3. Feet must be at least shoulder width apart
4. Knees should be bent
5. Straighten your spine—shoulders should be "cocked" perpendicular to your spine
6. Center your body weight evenly between your feet
7. Tuck your elbows into your body. Your upper arms should touch your ribs
8. Lift with your legs, not your back
9. Never twist your back while you are lifting or carrying a load
10. When setting items down, bend at the knees, not at the back

FALL-HAZARD PROTECTION PRACTICES

Please review these important points related to fall hazards at the workplace.

1. As our employee, you are not to work above the ground level, such as on a ladder or scaffolding, unless prior approval has been given by a representative from our company.
2. If an assignment requires you to perform work above ground level, you are required to wear proper safety equipment.
3. Always use handrails when climbing or descending stairs.
4. When carrying heavy loads, use elevators, not stairs.
5. Never lean over safety rails.
6. Always report spills, poor lighting, absent safety rails, and broken stairs to your supervisor immediately.
7. Never use a forklift as an elevator.

SAFETY

PERSONAL PROTECTIVE EQUIPMENT

The following are guidelines for personal protective equipment (PPE). This equipment will be supplied to you by our company or your supervisor. A representative from our company has conducted an onsite evaluation and identified the PPEs which may be needed. Please help us continue to provide a safe working atmosphere for you, our valued employee. If you feel, given the following guidelines, that you need PPE to effectively perform your assignment, please let us know immediately.

You will need **eye protection** in some environments as they protect your eyes from:

- * flying objects
- * chemicals
- * harmful dust
- * heat radiation
- * extreme heat

Eye protection might include safety glasses, goggles, or face shields.

You will need **hand protection** if you are working around a source of:

- * sharp objects
- * moving parts
- * electrical hazards
- * extreme heat or cold
- * chemical exposures

Hand protection might include latex gloves, leather gloves, or hand lotions.

You will need **foot protection** in some environments if you are:

- * rolling heavy objects
- * lifting heavy objects
- * exposed to extreme heat or cold
- * working on wet floors
- * working around falling objects
- * working in static sensitive areas
- * working around chemical storage

Foot protection might include steel-toed boots, metatarsal guards, or rubber-soled shoes.

ERGONOMIC PRACTICES FOR THE WORKPLACE

The following list contains some general practices to ergonomically enhance your working environment:

1. Notify your supervisor immediately if you feel awkward or uncomfortable while performing any aspect of your assignment.
2. Any job function which requires a high rate of manual repetition should be brought to our attention immediately.
3. Never use your hand as a "hammer."
4. If you are performing an assignment in an area which is constantly extremely cold or hot, notify us immediately.
5. If you are performing an assignment which causes constant vibration, notify us immediately.
6. Make sure that your work area is properly lit.
7. You are required to use ergonomic equipment if provided.
8. We are concerned if you are not comfortable performing your assignment. Please let us know if your assignment contains any of the above or other discomforts.

SAFETY

MACHINE GUARD GUIDELINES

Machine Guards Should:

- ◇ Prevent contact with the moving parts of machines. Guards will prevent fingers, hands, arms, and clothing from being dragged into a dangerous situation.
- ◇ Be secure. A loose guard might hinder you from performing at full capacity. A guard should be stable, not easily removed, and made of durable material.

Machine Guards Should Not:

- ◇ Prevent you from performing your job accurately.
- ◇ Create a new hazard. Check to make sure the guard does not expose sharp edges. Also, make sure the guard will not fall into the machine while being used.

Also...

- ◇ Make sure that you know when the guards can be removed, and by whom. Make sure you tell your supervisor immediately if the guards are not present. Never operate equipment that has a defective guard or a removed guard.

ELECTRICAL SAFETY PRACTICES

The following is a list of general rules regarding electrical safety:

1. All extension cords must be inspected on a monthly basis. Each cord should be tagged so the last inspection date is known by the user.
2. All extension cords and temporary wiring must contain three prongs, and must be connected only to properly grounded outlet components.
3. Before working on or around an exposed wiring area, be certain that the wires are not energized.
4. Be sure to follow proper lock-out/tag-out procedures while servicing equipment.
5. Do not make electrical repairs, connections, or installations unless you are qualified to do so.
6. Never use a damaged extension cord.
7. Never wear metal or conductive hard hats when working around exposed overhead wire, or other exposed electrical components.
8. Never use electrical power tools which are not properly grounded or double insulated. Never use a power tool which has the third (ground) prong missing.
9. Always tape cords to the ground when they are laying across a path of motion.