

[illegible]

_____ I-9 ____ W-2 ____

LAST NAME _____ FIRST NAME _____ M _____ HOME PHONE _____
ADDRESS _____ OTHER PHONE _____
CITY/STATE _____ ZIP _____ START DATE _____ E-MAIL _____

IS YOUR MAILING ADDRESS DIFFERENT? ☐ YES ☐ NO EMERGENCY CONTACT _____ PHONE _____

AREAS YOU WILL NOT WORK? _____ JOBS YOU WILL NOT DO? _____

DO YOU HAVE A CAR? YES NO

Staffing Solutions, LLC
610 SW Broadway, Suite 500
Portland, Oregon 97205

T: 503.295.9948
800.834.9762
F: 503.295.9977
E: admin@staffingsolutionsllc.com
www.staffingsolutionsllc.com



NOVELL __CNA__CNE__ECNE
MICROSOFT __MCP__MCSE__MCSN
CISCO __CCNA__CCNE__CCNP
__A+
__PMP

OTHER SW _____

OTHER HW _____

- ☐ LEGAL
- ☐ MEDICAL
- ☐ BANKING
- ☐ INSURANCE
- ☐ MANUFACTURING
- ☐ GOVERNMENT
- ☐ RETAIL/POS
- ☐ TELECOMMUNICATIONS

☐ ACCOUNT EXEC.
☐ APPLICATION DEVELOPMENT
☐ APPLICATION DEVELOPMENT
 MANAGER

- ARCHITECT (SOFTWARE)
- BUSINESS ANALYST
- COMPUTER OPERATOR
- DATABASE ADMINISTRATOR
- DATABASE ANALYST
- DATABASE ARCHITECT
- DATABASE DEVELOPER
- DESKTOP/PC SUPPORT
- HARDWARE TECHNICIAN
- HELP DESK/TECH SUPPORT i
- HELP DESK/TECH SUPPORT II
- HELP DESK/TECH SUPPORT iii
- I/S & I.T. MANAGER
- INTERNET/INTRANET DEVELOPER
- NOC TECHNICIAN
- NETWORK ADMINISTRATOR
- NETWORK ENGINEER
- NETWORK MANAGER
- PROGRAMMER/ANALYST
- PROJECT MANAGER/LEAD
- QA SPECIALIST/TEST
- SALES
- SOFTWARE ENGINEER

- ___ SOFTWARE QA ENGINEER
- ___ SOFTWARE QA TESTER
- ___ SUPPLY CHAIN SPECIALIST
- ___ SYSTEMS ADMINISTRATOR
- ___ SYSTEMS PROGRAMMER
- ___ TECHNICAL TRAINER
- ___ TECHNICAL WRITER
- ___ TELECOMMUNICATIONS SPECIALIST
- ___ WEB DEVELOPER

PLEASE ANSWER ALL QUESTIONS

1. Why are you seeking temporary employment? _____
2. Are you looking for full time employment? Yes ___ No ___ Long term assignments? Yes ___ No ___
3. Please list name of person who referred you to us? _____
4. Have you ever been convicted of a crime? Yes ___ No ___ If yes, when, where, explain

5. Have you ever been a defendant in a lawsuit alleging you committed any intentional act? Yes ___ No ___ If yes, when, where, explain

PLEASE LIST PREVIOUS & CURRENT TEMPORARY SERVICE EMPLOYMENT

Temp Service	City	From / To	Pay	Skill	Companies / Industries Worked For

Education: Circle Highest Grade Completed:
High School 9 10 11 12 **GED College** 1 2 3 4 **Grad School** No Yes **Degrees** _____ **Other Schooling** _____

LIST ANY OTHER SKILLS YOU HAVE: _____

PREVIOUS FULL TIME EMPLOYMENT (List last employer first) (We may also ask for additional job information and places you have lived.)

From	To	Company Name & Address	Title &/or Duties	Supervisor	Phone	Reason for Leaving	Salary

As a condition of employment, you will be required to complete the U.S. Immigration and Naturalization Service Form I-9 and produce required original documents establishing your identity and authorization to work.

CERTIFICATION UNDER PENALTIES OF FALSE STATEMENT-ACKNOWLEDGMENT OF AT WILL EMPLOYMENT

I certify that the answers given herein are true and complete to the best of my knowledge. I understand that employment may be terminated or denied me because of false, incomplete or misleading information in my application or interview(s). I understand that nothing contained in this employment application or in the granting of an interview creates an agreement for employment or any other benefit. No promises regarding employment have been made to me. If I accept an assignment, I understand that unless stopped by you or your client, I will complete the assignment. I have the right to not accept an assignment or tell you I am no longer available for work, at any time and for any reason or no reason and that you have the same right to terminate an assignment or not place me in an assignment for any reason or no reason.

RELEASE OF INFORMATION & AUTHORIZATION FOR CONSUMER REPORT

I authorize my employers, schools or persons named above to release to Staffing Solutions, LLC all information regarding my employment, salary, grades, job performance, character and qualifications. I also agree that Staffing Solutions, LLC may obtain a "consumer report" under the Fair Credit Reporting Act. I authorize all such parties who are contacted for information about me to release all such information about me without obligation or liability to me on account of such release.

SignatureDate

DO NOT WRITE BELOW LINE

Below

APTITUDE			
ATTITUDE			
APPEARANCE			
ABILITY			
VOICE			
MANNERS			
PERSONALITY			

EVALUATIONS:

INTERNAL OFFICE COMMENTS:

Professional Code of Conduct

I have read and received a copy of the Professional Code of Conduct/Employee Orientation procedures from Staffing Solutions, LLC. I hereby agree to follow all procedures and requirements if I accept employment through Staffing Solutions. I understand these terms and conditions.

Signature

Date



Professional Code of Conduct

Company Policies

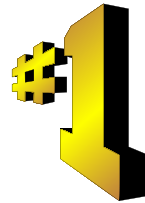
Staffing Solutions, LLC / K-Counsel®
610 SW Broadway, Suite 500
Portland, Oregon 97205
Phone 503-295-9948 Fax 503-295-9977
admin@staffingsolutionsllc.com

STAFFING SOLUTIONS, LLC -- A PROFESSIONAL CODE OF CONDUCT
EMPLOYEE ORIENTATION and COMPANY POLICIES
(Revised August 6, 2003)

Welcome to Staffing Solutions, LLC/K-Counsel®. You are an integral member of our Professional Staff.

It is prestigious to work through Staffing Solutions, LLC/K-Counsel®. Why? We have a commitment to our clients and temporaries to provide excellence in service, professionalism and values of respect to all members of our community. Our reputation in this industry is well-known; our management team is recognized by top law firms and corporations metro-wide.

We have a combined experience of over 100 years in law firm/corporate recruiting, placement, administration, and Temporary Help Industry management and technical recruiting and placement.



As our “temporary”, WE ARE YOUR EMPLOYER. We send you to our client and we pay you. Your pay depends on your experience and the job requirements. We also pay for your worker’s compensation coverage and unemployment insurance. By accepting an assignment, you agree to the terms and policies below.

APPLICATION

Your application for work must be accurate and truthful. We will discharge you if there is any false or material misrepresentation on your application.

LENGTH OF EMPLOYMENT

By the nature of our business, your employment with us is “temporary” and “at will”. This means you or we may end your employment, with or without notice, and with or without reason. However, if you accept an assignment, we expect you to complete the assignment. Our client may also end your assignment, with or without notice, and with or without reason.

WHAT WE EXPECT FROM OUR PROFESSIONALS

Attitude and Cooperation

- Be “of service” and demonstrate your willingness to perform the tasks in a timely fashion.
- Be pleasant, courteous and use proper business manners.
- If you are not certain on how to complete a requested task, ASK FOR DIRECTIONS.
- Business wardrobes are required for all assignments, unless otherwise specified.

Reliability and Responsibility

Arrive ON TIME

PERFORM THE TASKS OUR CLIENTS REQUEST, WHICH YOU AGREE TO DO WHEN YOU ACCEPT THE JOB.

Change in Assignment or Given Client's Property

We ask our clients not to assign you to other types of work without our prior approval. If that occurs, we expect you to call our office BEFORE doing any work that is not in your current job description. EXAMPLES: lifting and moving boxes; driving, etc. We want you to call us also if you are given any client property, such as a credit card, ability to charge on client's account, laptop computer, cell phone, keys or other similar items. You agree to return all items, including keys, immediately upon the termination of the assignment. We may require you to sign a specific agreement about the items use and return.

Attendance

In addition to arriving at your assignment ON TIME, PROFESSIONALS observe our client's business hours. Do not request to change your hours without advance approval from our office. We will make any changes through our client. COMPLETE THE ASSIGNMENT as you agreed. Any employee who does not show for an assignment or leaves without permission before completion, WILL NOT be considered for future assignments.

Clients' Information Systems

While working for our client you will most likely use one of their Information Systems (computer, telephone, voice mail, e-mail or Internet). Remember these systems and their contents are our client's assets. You should not have any expectation of privacy. You are not to download or take any data or programs from our client. You will not change or block any password on any information system. Good judgment should always be employed in using any information systems. Please take special care to avoid any files, messages or data that would be inconsistent with our and our client's policies, such as those prohibiting discrimination and harassment. Avoid any jokes or comments that could offend someone on the basis of gender, race, religion, national origin, disability and sexual orientation. Do not visit or download material from any sexually graphic web sites.

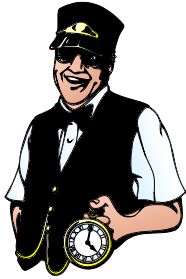
Confidential Information and Trade Secrets

All information you may have access to from our client or its customer, including any non public personal information, is confidential and shall not be disclosed to anyone unless our client consents. Trade secrets of our client shall be held in confidence. All work you perform for our client is "work for hire" and our client shall have all ownership interest in the work or product.

EVALUATING YOUR PERFORMANCE

Staffing Solutions, LLC makes a special effort to match your skills, experience and qualifications with the needs of our clients. You will be evaluated by our clients upon completion of the assignment. These evaluations will be part of your work record and will be considered for future assignments.

TIME CARDS, OVERTIME, RELEASE TO OTHERS



It is your responsibility to submit a properly completed time card, signed by an authorized supervisor and your signature. If you have trouble doing this, let us know immediately. No paycheck will be released to another person without your written permission. Overtime begins according to state law; for Oregon it starts after 40 hours worked in one week. You must have prior approval from your immediate supervisor who must notify our office before Overtime is worked.

Please see Sample Time Card for proper completion. Mark the time you start and stop work each day. Record your time to the nearest 1/4 hour. Subtract the time spent for lunch, then add up the total time for the week. You sign the card, then have your supervisor sign it.

Procedure: Fax your time card to us on Friday and then drop your time card off on Friday (for the current work week) or no later than the following Monday. If you prefer to mail your time card, we cannot guarantee receipt by Monday for processing. We must have time cards no later than 12:00 PM, on Monday FOR THE PRECEDING WORK WEEK. If you have problems, let us know immediately. We encourage you to physically come in for Time Card Processing as well to pick up your pay check.

PAY DAY

If we receive your time card by Monday noon, you will be paid on Friday for the preceding work week. If we receive your time card after Monday noon, your pay day will be the second Friday following the time card's receipt. Payroll checks will be ready by 12 noon on Friday. We will hold the checks until 4:40 PM on Fridays to allow for travel time, as well as the opportunity to see you and share information about future job assignments. After 4:40 PM, we mail them. If you cannot come to the office to pick up your check and you notify us in writing, we will mail your check on Thursday night.

TEMP TO HIRE

DO NOT SOLICIT OUR CLIENTS for full time positions. If they want to hire you for full-time work, they will contact us. Our conversion policy from temporary work to full-time may vary with each client. If you accept an assignment through us and are offered a full-time position with that client, you may be required to remain on our payroll for an additional period of time depending on our agreement with our client.

CALL US WITHIN THE FIRST 15 MINUTES IF:

- You cannot report to work.
- You are offered a job.
- Your assignment ends.
- You are going to be late.
- You are sick.
- You have accepted another job.
- You have any problems at work.
- Your supervisor wants to change your job description.
- You become injured on the job.
- You are unable to perform the task requested.



COMMUNICATION

Our office hours are 8:00 AM to 5:00 PM, Monday through Friday. If you need to reach us before or after office hours, you may leave a message on our voice mail.

Our telephone # is: 503 295-9948. Our Fax # is: 503 295-9977.

ACCIDENTS

You must IMMEDIATELY report TO US, any accident on the job that requires medical treatment or time off from work.

Our objective is a strong “Return to Work” commitment for injured employees. If you become injured, you will be advised of our Return to Work - Light Duty requirements.

AVAILABILITY

Once you have registered and your skills have been evaluated, check in at least once a week; we need to know where you can be reached for assignments. Our clients call us all day long, and many future assignments are placed and special requests are made for specific temporaries--so it is **important we have a working telephone number** for you at all times.

UNAVAILABILITY

Please notify us by phone if you are no longer active or wish to work. Your status will be posted on your application as INACTIVE. If you change your status to ACTIVE within one year, you will not have to be retested, but you might need a new W-4. Temporary employment gives you flexibility, but if you turn us down on a number of assignments or fail to check in weekly when not working, we will consider you to be inactive.

CURRENT ADDRESS & TELEPHONE (OR MESSAGE PHONE)

You are responsible to notify us in writing if you change your address or phone number. This will be part of your record and necessary to process W-2's. If you request your paycheck to be mailed, we cannot guarantee prompt delivery without a proper address. PLEASE NOTE: year end W-2's, sent in January, cannot be delivered without a current address, so if you change your address after leaving our employ please keep us informed.

HARASSMENT POLICY

Policy. We will not allow, nor will you engage in, any form of harassment of any individual or any such conduct that has the purpose or effect of interfering with an individual's work performance or creating an intimidating, hostile, or offensive work environment because of that person's sex, race, religion, creed, color, age, national origin, ancestry, marital status, veteran status, disability, sexual orientation, or any other status protected under applicable federal, state or local law. Respect for the dignity and worth of others should be the guiding principle for our relations with each other.

Prohibited Conduct. Prohibited conduct includes, but is not limited to, racial, ethnic or religious slurs or jokes. It includes unwelcome sexual advances, requests for sexual favors, physical touching, or the granting or withholding of benefits of employment (e.g., pay, promotion, time off) in response to sexual conduct when (1) submission is made either explicitly or implicitly a term or condition of an employee's employment, (2) submission to or rejection of such conduct by an employee influences employment decisions affecting the employee, or (3) the conduct has the purpose or effect of interfering with an employee's work performance or creating an intimidating, hostile or offensive work environment.

Prohibited conduct may be oral, written, visual or physical in nature. More subtle forms of behavior, such as offensive posters, cartoons, comments and jokes of a sexual, religious, racial or ethnic nature also may constitute harassment when they create or contribute to an intimidating, hostile or offensive work environment.

Implementation Guidelines. If you believe that you are a victim of sexual, racial or other social harassment by any of our employees, our customer or their employees, you must report the circumstances as soon as possible to the person in our company who placed you in the assignment or any of our staff with whom you feel comfortable. If the complaint is about any of our staff, then an owner should be contacted.

We will investigate all complaints of harassment to the extent possible based on the information available about the circumstances. While the complaint and any information gathered in an investigation is considered confidential information, employees should be cautioned that pursuing an investigation may require or lead to disclosure of the identity of those connected to the complaint or to disclosure of information which could lead to the identification of persons connected to the complaint. If you report any social harassment, no adverse employment decision will be made against you for making such a report.

EMPLOYEE BENEFITS

Vacation Pay

Work 1000 hours in a calendar year (January -December), receive 5 days' pay at average pay rate earned in above period.

Holiday Bonus

Work 1000 hours in the twelve months prior to the holiday and receive \$100 for that holiday:



New Year's Memorial Day July 4 Labor Day Thanksgiving Christmas

You must also have worked the day BEFORE the holiday and the day AFTER the holiday to qualify.

Payroll Service Employees

If you are a payroll service employee, you do not qualify for vacation pay or holiday bonus unless our client authorizes such payment.

Health Insurance

You will become eligible for health insurance when you first start to work for us. We do not administer or contribute to this plan, it is done on an individual basis through JL Barnes and Fortis Insurance. You will receive a brochure with your first paycheck.

Profit Sharing Pension Plan

Staffing Solutions, LLC funds its Profit Sharing Pension Plan. You are not required to make a contribution. You will be notified by the Plan Administrator upon qualifying for the plan and what contribution has been made for your account. *The plan is governed by the plan document, which shall control at all times.*

STAFFING SOLUTIONS, LLC – DRUG TESTING POLICY

Staffing Solutions, LLC and its clients, have a strong commitment to their employees to provide a safe environment and to promote high standards of employee health. Consistent with the spirit and intent of this commitment, many of our client's have established a policy on drug and alcohol use. Their goal is to establish and maintain a work environment that is completely free from the effects on employees of alcohol and drug use. In all respects our policy will be the same as our client's policy, unless parts or all of our client's policy is not legal.

PRE-EMPLOYMENT TESTING

Pre-employment drug screening of employees for unlawful drug use is required by some of our clients. We will notify you if you are being considered for an assignment with one of these clients. At that time, if available, you will be given the client's drug policy. You will be required to follow that policy as a condition of employment with that client.

TESTING PROCEDURE

We will be doing the test on behalf of our client. It will be a urine sample taken on our premises. As a condition of employment with our client, you will be required to give a urine sample, and certify that it is your urine taken at the time the kit is given to you.

In the event of an inconclusive test for drugs, the sample will be sent to the laboratory for conformation, in accordance with the laboratory's procedures.

If the laboratory confirms an inconclusive screening test as positive, you will not be eligible for the job with the client who requested the test.

TEST RESULTS

Drug test results, inconclusive, positive or negative, and the fact that a test was performed, will be kept as confidential as possible under all the factual circumstances. Our client of course must be notified. Further testing, second testing, what constitutes a refusal to take the test, the extent to which other legally prescribed medications and any other matters involving the tests will be conducted in accordance with the policy of our client.

FUTURE EMPLOYMENT WITH US

If your test is confirmed positive by the laboratory, we will not consider you for placement with any of our clients for a period of six months.

SAFETY IN THE OFFICE

REMEMBER

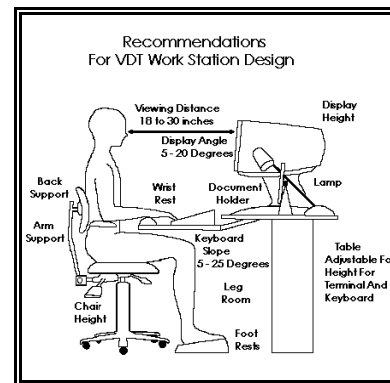
In case of an accident or emergency dial **911**
Your address at your assignment is: *(you should fill this in below)*

YOUR DESK and CHAIR. DO NOT be afraid to adjust your desk chair, so it is in an ergonomic correct position. Your chair in relation to your work, or computer should be adjusted so it looks like the figure below.

Five simple steps for healthy computing:

Using these guidelines and diagram, work together with your supervisor to solve your ergonomic programs.

- Make sure your monitor and keyboard are positioned appropriately.
- Make sure if you have an ergonomic designed chair, that it is adjusted correctly.
- Make sure that you have adequate and appropriate lighting.
- Do quick exercises to keep your muscles relaxed.
- Move your eyes frequently and focus them away from the screen.



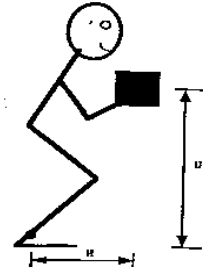
SLIP AND FALL. Watch where you walk! Watch for loose carpet, electrical boxes, cords, boxes or anything you could trip over. Do Not use stools without someone to steady you. If you are at all uncertain as to how to use a small ladder or stool, ASK FOR HELP. Do Not lift heavy boxes or equipment over your head without some help.

HAZARD COMMUNICATION. Generally, most offices do not have hazardous substances. Whiteout, toner and other copier fluids are what you will generally see. If you have any problems with these substances, please contact your supervisor. If you come into contact with any other substance which you believe may be hazardous or harmful to you, let your supervisor know immediately. Forms are available or will be obtained which describe the substance and its properties.

LIFTING BOXES OR EQUIPMENT. Do Not lift more than you are comfortable with. We recommend not lifting more than ten (10) pounds from the floor to a table nor more than five (5) pounds from the table to an overhead shelf. When lifting please follow the technique which follows:

BASIC LIFTING & LOWERING TECHNIQUE

- Plan the lift (route, obstacles, doors)
- Estimate the weight of the object (heft/tilt test)
- Spread feet apart (about shoulder width)
- Bend your knees
- Tighten stomach muscles
- Head up & chin out
- Securely grip the load
- Keep the load close to the body
- Lift slowly & evenly, avoid rapid, jerky motions
- Avoid simultaneous lifting and twisting



VIOLENCE. While we hope no violence will take place, you must understand that neither we nor our client can prevent all violence. You and we need to work together to reduce the risk for such violence. If at any time you feel uncomfortable with a co-employee, customer/client or other person, please advise your supervisor. If you work late, you should notify your supervisor. Ask if they will have someone escort you to your car. If you apply for or obtain a protective or restraining order which lists our or our client's premises as being protected areas, provide us with a copy. We understand the sensitivity of the information requested and we will our best to keep it confidential. We will have to notify our client. If you would like more information, please ask for our supplemental brochure about "**Warning Signs of Potentially Violent Individuals**" and "**Personal Conduct to Minimize Violence.**"

GENERAL SAFETY. Observe good housekeeping around your desk and the equipment you use.

- Do not perform any action that causes hazards or makes any equipment unsafe.
- Keep boxes, files, etc. out of walkways so people won't trip.
- Keep desk drawers closed. Keep file cabinet doors closed.
- If using a shredder, be careful of dangling jewelry, ties and hair.

REPORTING ACCIDENTS AND INJURIES. Any work related accident or injury, must be reported to us immediately. If you cannot, then ask someone to tell us.

GUIDELINES
FOR
LEGAL ASSISTANTS, LAW CLERKS AND SUPERVISED LAWYERS

You may be performing legal research, writing and case review for our client. You **must follow** the guidelines which follow. If you are asked to do something contrary to the guidelines, you are required to call us to explain the situation before you proceed. Should you have any questions, call us.

GUIDELINES

- Your work is reviewed and supervised by a lawyer;
- You make no strategy or case decisions;
- You do not hold yourself out to any client as a lawyer;
- You sign no letters, pleadings or briefs;
- You attend no depositions as the lawyer of record;
- You make no court appearances as the lawyer of record;
- You do not use the title “lawyer,” “attorney at law,” “counselor,” “attorney,” or “J.D.” on any correspondence or documents; and
- You are not listed in the firm name or on the firm letterhead as a lawyer or firm member.

OTHER DOS AND DO NOTS

- Direct your legal research memos to your supervising lawyer and never send them directly to the client;
- Do not participate in or conduct client interviews;
- Do not discuss the case, formally or informally with the client. This includes discussion by phone and in person; and
- Do not correspond with the client.

If you are a **lawyer** working as either an assistant or law clerk, without being admitted to the Oregon State Bar and having Professional Liability Fund insurance coverage, it is very important that you follow the guidelines. These guidelines are adapted from exemptions to the Oregon State Bar’s Professional Liability Fund. If you have any questions about Professional Liability Fund coverage or the activities which you can do as a lawyer exempt from such coverage, please contact the Professional Liability Fund 503-639-6911 or 1-800-452-1639.



EMPLOYMENT AGREEMENT TECHNICAL SERVICE EMPLOYEE

Throughout this Agreement, **Staffing Solutions, LLC**, employer, will be referred to as "we", "us" or "our" and the Employee will be referred to as "you" or "your". "Our client" will be the entity to which you are referred for interview or work and any of their customers for whom you are on a project or on whose site you may actually work. In consideration of our employing you, sending you for an interview or assigning you for temporary work at our client, you and we agree as follows:

1. Reporting/Interview Date and Work Rules. You agree to report to our client for work on the day scheduled, "Reporting Date," and work on the assignment until it is completed or until it is terminated. If you are sent for an interview you agree to attend the interview as scheduled and if offered the temporary assignment you will report on the "Reporting Date." You agree to all the terms and conditions of this agreement. You further agree to follow all work rules, safety rules and policies of our client.
2. Compensation. If you are employed by us, we will pay you the agreed rate of pay for the hours you actually work for our client on our regularly scheduled pay day. We will pay you the overtime actually worked and authorized by our customer in advance of your working the overtime.
3. Time Cards. You are responsible for keeping your time card for all the hours you work. Once the time card or hours are called in to us, you agree not to claim further hours later.
4. Return of Our and Our Client's Equipment. In the event we or our client (you will notify us immediately in this event) allow you to use a credit card or other equipment for use on the assignment for our or their behalf, you agree that such credit card and other equipment is our or our client's property. You further agree that such shall be used **only** for our or our client's business purposes. When the assignment terminates or we or our client requests, you will promptly return the credit card and equipment to us or our client. In the event you do not return the equipment or have used the credit card for other than our or our client's business you agree to pay us or our client for the non business related items and/or the current fair market value to replace the equipment. You further agree that we may enforce this provision and we will be entitled to all our costs of collection including attorney fees, court costs, investigation fees, and other related costs of collection. You also agree to pay for the time we spend internally in preparing this collection matter at the same rate as you were paid on the assignment.
5. Confidential Matters. During your employment with us, you will have access to and become familiar with various trade secrets and other sensitive or confidential information (hereafter called "Confidential Matters") of ours and our client. Such "Confidential Matters", all of which are owned by us or our client, includes, but is not limited to, the following: protected trade secrets, information with respect to inventions, designs, formulas, tools, equipment, unpublished written materials, plans, processes, costs, methods, systems, improvements, enhancements, modifications, technical or business innovations and any and all expressions of computer programs, manuals, data bases, and all forms of computer hardware, firmware, and software; names and addresses of our client's customers, including non public personal information of our client's customers, employees, suppliers or other matters; systems for recruitment or for the operation of our or our client's business; and any and all computer generated or computer stored information, data files, prints, descriptions, systems, software, or documentation and anything else provided by us or our client. You agree to hold in strict confidence and not to disclose any "Confidential Matters", directly or indirectly, to anyone, nor to use them in any way, either during your employment with us or at any time after its termination, except as may be required in the course of your performing services hereunder, or if we give our prior written consent.

All formulas, files, records, reports, programs, manuals, tapes, card decks, listings, software, systems, drawings, specifications, agreements, equipment and similar items or enhancements, modifications, or improvements, customer and supplier lists, relating to our business, whether prepared by you or through some other source, will remain our exclusive property and you will not remove from our premises any such items under any circumstances without our prior written consent. You also agree that, in the event of the termination of your employment with us, you will immediately return all such items which may be in your possession and if requested by us you will state in writing that all such items were returned.

6. Developments. You agree that you will promptly and fully disclose to us in writing any "Developments". "Developments" include, but are not limited to, new recipes, new formulas, new processes, new customers, new employees, data, drawings, electronic recordings, writings, information, inventions, designs, ideas, improvements, enhancements, modifications, technical or business innovations, and discoveries, whether or not such can be patented or copyrighted, which relate in any way to your work for us or our client, or to our or our client's business or are suggested by such matters and which you may make, record, write, conceive, develop, first reduce to practice or discover, alone or with others during your employment with us (regardless of whether made, recorded, written, conceived, developed, first reduced to practice or discovered during working hours) and after the termination of your employment with us.

All such "Developments" will become our or our client's exclusive property and you agree to assist us (at no cost to you) during your employment or at any time or times thereafter in executing documents and doing any other things necessary to obtain patents, copyrights, or other legal protection in our or our client's name and to otherwise vest complete right, title and interest in us or our client to any such "Developments" or any other exclusive property of ours or our client.

You represent and warrant that there are at present no recipes, formulas, processes, recordings, writings, inventions, improvements, or discoveries -- not included in a copyright, copyright application, patent, or patent application -- which were recorded, written, conceived, invented, made, or discovered by you before entering into this Agreement and which you desire to remove from the provisions of this Agreement, except those specifically set forth by attachment hereto.

7. Additional Documents and Assignment. If we so request, you also agree to execute and deliver during your employment or at any time or times thereafter any such agreements or documents, pertaining to any such "Developments" and/or "Confidential Matters", as we may request.

These Developments and Confidential Matters provisions shall be for our and/or our client's benefit. We or they shall have all rights and remedies to enforce any and all provisions. We also reserve the right to assign this agreement and all the provisions herein to any other person or entity.

8. Obligations During Employment with Us and After Interview or Termination. During any assignment with us and/or for a period of ONE HUNDRED EIGHTY (180) days after the later of, any interview or terminated assignment, you agree that 1) you will not work for, accept employment from, nor will you solicit employment with our client (remembering this also includes our client's customer,) and 2) you will not accept employment with another employer for an assignment to work at our client's premises or on a project for our client which may not be on its premises. You also agree that any period of violation or time required for litigation to enforce this provision will not be included in this 180 day period. You acknowledge that we have spent time in procuring this client and our client has spent time procuring its customer, interviewing or reviewing your qualifications for the temporary job and that this is sufficient consideration to enforce this provision. You and we both recognize that, if the above provisions are violated, remedies which would typically be available to us for contract breach would be inadequate. Therefore, you and we have agreed that we have the right to obtain injunctive or other equitable relief against you, and any other person who may be involved or connected with you, in the event that these provisions are breached. These rights will be in addition to any other rights which we may have under law. If a violation occurs under this paragraph we will have the right to obtain attorney fees and cost from you, to be set by the court, if any action or suit is necessary to enforce this provision.

9. Other Agreements. You represent to us that you have made no other agreements which would stop you from entering into this agreement. You represent that if you are bound by an agreement not to divulge any confidential information of another employer you will notify us of its content and extent.

10. Survival of Certain Provisions; Remedies. You and we have specifically agreed that the above Developments, Confidential Matters, and Obligations During Employment with Us and After Interview or Termination provisions of this Agreement are considered as agreements independent of any other provisions of your employment with us, and the existence of a claim which you might allege against us, whether based on this Agreement or otherwise, will not prevent us from enforcing these provisions. Further, relying upon your agreement to these provisions, we are placing you in a position of great trust and confidence. You and we both recognize that, if the above provisions are violated, remedies which would typically be available to us for contract breach would be inadequate. Therefore, you and we have agreed that we have the right to obtain injunctive or other equitable relief against you, and any other person who may be involved or connected with you, in the event that these provisions are breached. These rights will be in addition to any other rights which we may have under law.

In the event that we institute legal action against you to enforce the above Developments, Confidential Matters and/or Obligations During Employment with Us and After Interview or Termination provisions, and in the event that such action leads to or results in a court decision or settlement in our favor, you agree to fully reimburse us for our legal fees and related costs involved in our pursuing such action against you.

11. No Change In "At Will" Employment. You understand that this Agreement is not intended to alter the "at will" nature of our employment relationship.

You and we have executed this Agreement, intending to be legally bound by it.

Staffing Solutions, LLC

By:

Date

Employee

Date



ACCOUNTING INFORMATION

We at Staffing Solutions, LLC appreciate you filling out all our forms. Each is used for a particular purpose to help us place you in an appropriate position and make sure your pay is accurate. This form is used by our accounting department and to see if you have reached the minimum age to be considered under our pension plan. Please fill out the top portion. Thank you.

This form is filed separately from your employment application.

DATE: _____

NAME: _____

TELEPHONE#: (____) _____

CELL PHONE#: (____) _____

EMAIL: _____

SOCIAL SECURITY #: _____ - _____ - _____

DATE OF BIRTH: _____

DO NOT WRITE BELOW THIS LINE FOR OFFICE USE ONLY

DATE OF HIRE: _____ **CODE:** _____ **Payroll ID:** _____

DATE OF TERMINATION: _____

REHIRE DATE: _____ **Is new paperwork on file?** ☐ Yes ☐ No

ACCOUNTING NOTES:

ACCOUNTING INFORMATION rev 2008 ACCOUNTING INFORMATION rev 2008

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INFORMATION rev 2008.doc

REMINDER

To ensure you receive your paycheck timely, the following two steps are critical:

1. On Friday, submit your timecard to our office one of the following ways:
 - Deliver your timecard to our office
 - Fax your timecard to 503-295-9977
 - Scan and e-mail your timecard to accounting@staffingsolutionsllc.com . If you email your timecard, you will receive a reply message of “Thank You” so that you will know it was received.
2. The original copy should then be delivered to our office or put in the mail.

Please Note: In order for us to complete the processing of your paycheck, we **must** have a copy of your timecard **no later than 10 AM on Monday**. If it is not in by this time, your paycheck may be delayed until the following week.

For your convenience, you can obtain a copy of our timecard at www.staffingsolutionsllc.com.

Go to “Career Opportunities”. On the left, click “Required Paperwork Downloads”, then “Timesheet/Timecard”. After completing the timecard, make a copy for your supervisor and yourself, then submit as outlined above.

If you have any problems with your paycheck, please contact Susan in our Accounting Department at accounting@staffingsolutionsllc.com.

Susan and your recruiter need to know of any changes in your address or telephone number. Please fill out a new W-4 if you require any changes of your withholding status and allow one week for the changes to become effective.

HOW DO YOU WANT YOUR PAY CHECK DELIVERED TO YOU

Please indicate below if you want your pay check mailed to you, if you would like to pick it up yourself or if you want a direct deposit to your savings or checking account. We mail checks or earnings statements on Thursday. We cannot release your paycheck to anyone other than yourself without your written permission and telephone call.

☐ **MAIL**

Name: _____ () _____
Please Print Telephone

Address: _____

City & Zip: _____

SIGNATURE: _____ \ _____
Date

☐ **PICK-UP FRIDAY** - After 12:00 Noon & Before 4:30 PM

SIGNATURE: _____ \ _____
Date

☐ **DIRECT DEPOSIT – Available only if your assignment is a week or longer.**

To enroll in Direct Deposit, fill out this form **attach a voided check** for the checking account (not a deposit slip) in which you want your pay deposited and return it to Staffing Solutions, LLC. If depositing to a savings account, ask your bank to give you the Routing Transit Number for your account. It isn't always the same as the number on a savings deposit slip. This will help ensure that you are paid correctly.

Important! Please read and sign before completing and submitting.

I hereby authorize Staffing Solutions, LLC (hereinafter "Company") to deposit any amounts owed me by initiating credit entries to my accounts at the financial institution (hereinafter "Bank") indicated on this form. Further, I authorize Bank to accept and to credit any credit entries indicated by Company to my accounts. In the event that Company deposits funds erroneously into my account, I authorize Company to debit my account for an amount not to exceed the original amount of the erroneous credit.

This authorization is to remain in full force and effect until Company and Bank have received written notice from me of its termination in such time and in such manner as to afford Company and Bank reasonable opportunity to act on it.

Bank Name/City/State: _____

Employee Name: (Print) _____ Social Security #: ***-**-_____

SIGNATURE: _____ \ _____
Date

ATTACH VOIDED CHECK TO THIS FORM – Do not tear off the bottom routing and account numbers.

CHANGE OF VITAL INFORMATION

Name _____ Social Security No: _____

NAME CHANGE

New Name: _____ Social Security No: _____

ADDRESS CHANGE

New Residence Address: _____

New Mailing Address (if different): _____

PHONE CHANGE

New Phone No: _____ New Alternate Phone: _____

OTHER CHANGES

OLD

NEW

☐ I pickup my check

☐ Mail my checks to mailing address above

REQUEST FOR W-4 or W-5 CHANGES

If you have made any changes in marital status, exemptions or other matters that may effect your withholding YOU MUST fill out and SIGN a new W-4 or W-5. ☹ NOTE: Exempt and over 9 dependants must be reported to IRS.

I authorize the foregoing changes in my records. If checked, please send or give me a new ☐ W-4 ☐ W-5.

_____ Date: _____

Office Use Only:

Date entered and/or W-4,W-5 sent: _____
(copy to payroll, and make name, address or phone changes to their employee file)

TIME RECORD

REPORT ALL TIME TO NEAREST 1/4 HOUR

DAY	START	STOP	TOTAL	LESS LUNCH	DAILY TOTAL
MON					
TUES					
WED					
THUR					
FRI					
SAT					
SUN					

TOTAL STRAIGHT TIME _____

TOTAL OVERTIME _____

EMPLOYEE / LAST NAME FIRST NAME

_____ - _____ - _____ Is Assignment over? ____ Yes ____ No
Social Security Number

CUSTOMER

Location Supervisor

WEEK ENDING (Sunday) ____/____/____

Staffing Solutions, LLC / K-Counsel®
610 SW Broadway, Suite 500
Portland, Oregon 97205
T: 503.295.9948
F: 503.295.9977



EMPLOYEE INSTRUCTIONS

PLEASE FAX this to us upon signing by supervisor and mail or deliver to us by Monday of the following week.

CERTIFICATION

Under penalty of perjury, I certify that I have actually worked the hours reported and that I have worked no other hours.

Date ____/____/____

CLIENT'S AGREEMENT

I have agreed to the terms and conditions of the Master Agreement previously received & the terms of service on the back of this time sheet.

I have verified the hours worked as reported on this time record and state they were performed satisfactorily.

SUPERVISOR'S SIGNATURE

Date ____/____/____

You agree that the terms following shall apply in addition to the terms of the Master Agreement (IF YOU DO NOT have a copy of the MASTER AGREEMENT contact us immediately) to every transaction between us, Staffing Solutions, LLC and you (our Client):

1. You agree to pay on receipt of invoice the charges at the quoted rate for the hours worked as reported and verified on the time card. Any overtime as required by law will be billed at 1 ½ times the quoted bill rate. If payment is not received within five (5) days of the invoice, you agree to pay an additional 1.5% per month on the outstanding balance.
2. You agree to notify us immediately if there are any changes in the employee's job duties from those originally specified.
3. You will provide our employee with a suitable place to work. You agree to comply with all laws regulating employment practices and places of employment.
4. Without our permission, you will not allow our employee to have access to any unattended premises, to handle cash, negotiable instruments, jewelry or other valuables. You will not give our employee a credit card or allow our employee to charge with any of your suppliers. You will not give or loan our employee any equipment not to be used exclusively on your premises, such as a laptop computer or cell phone.
5. We do not provide insurance for our employee driving any vehicle. You agree to be responsible for any liability or claims arising out of operating any vehicle by our employee while working for you. We do not provide insurance for any damage or loss to your property while in our employee's care, custody or control. You agree to assume such loss.
If driving or handling of cash, securities, negotiable instruments or other valuables are required, then you will have to agree to an indemnity and hold harmless agreement.
6. You agree to pay us our regular full time placement fee or conversion fee as set forth in the Master Agreement if you do any of the following: a) you transfer our temporary employee to the payroll of any other company, b) you allow our employee to work for you directly or through any other company within 180 days after completion of any assignment through us, c) you allow our temporary employee to work for a subcontractor of yours within 180 days after completion of any assignment through us, or d) you or any related company to you hires our temporary employee.
7. You agree that we are entitled to our attorney fees together with all expenses (including collection agency fees) if it becomes necessary to hire an attorney to collect any sums due or to enforce any other provision of this agreement.

Modifications to this agreement must be in writing and approved by counsel for Staffing Solutions, LLC.