



CLIENT INFORMATION

- (1) Innovative Partners incurs substantial recruiting, screening, administrative and marketing expenses in connection with the temporary (“Employer”) named on below. If Client hires Employee permanently within 4 months after Employees’ start date, it shall be through the Contractor. In the event Client wants to hire the Employee permanently, it shall only be after Employee works a minimum of 480 hours on Contractors payroll, or the Client will be charged liquidated damages in the amount of \$1,800.00.
- (2) Client certifies that the time set forth as hours worked is correct and that the work was performed in a satisfactory manner.
- (3) Client confirms the prior agreement between Contractor and Client with respect to the services performed hereunder and any future services.
- (4) Client has not and shall not in the future without prior written permission from Contractor in each instance: (i) entrust Employee with unattended premises, cash, negotiable instruments, or other valuables or authorize Employee to operate machinery or motor vehicles; (ii) assign Employee to perform work other than that described at the time Client placed the job order.
- (5) Contractor’s insurance does not cover loss or damage caused by Employee operating Client’s owned or leased motor vehicle(s), and Client therefore accepts full responsibility for claims, including the defense thereof, involving bodily injury, property damage, fire, theft, collision, cargo damage or public liability damages sustained or incurred as a result of Employee driving such vehicle(s), or arising out of involving violation by Client of paragraph 4(i) or 4(ii) above.
- (6) Contractor is not responsible for claims made under its liability or bond insurance policies unless such claims are reported to Contractor in writing by Client within 30 days after occurrence.
- (7) Contractor is not responsible for claims for damage to property within Contractor’s or Employee’s care, custody and control.
- (8) In the event of Client’s non-payment of Contractor’s invoices, Client agrees to be responsible for all collection expenses, including attorney’s fees, interest and court costs.
- (9) Client accepts the obligation to discuss all matters concerning Employee, including without limitation, Employee’s job assignments, wages and payroll procedures with Contractor and not with Employee directly.
- (10) Client shall indemnify and hold Contractor, its subsidiaries, affiliates and agents, including the employer of record harmless from any and all claims and damages arising out of Client’s violation of employment laws including, without limitation, OSHA and EEO, and immigration laws.

EMPLOYEE INFORMATION

- (1) **Recording Your Time.** Report all time to the nearest ¼ Hour. Do not show odd minutes.
- (2) **Overtime.** All authorized work you perform in excess of 40 hours per week (Sun-Sat) will be at time and one half the regular rate. You are permitted to work overtime only if the client requests and approves such work. Approval must be obtained from us by the client before overtime can be authorized.
- (3) **Lunch.** Your lunch period will be determined by the supervisor to whom you are assigned. If you work a full day, the law requires you take a minimum of one half (1/2) hour for lunch.
- (4) **Absence.** Call Us At Once. We will contact the client, if you will be out for a number of days it will be up to the client to decide whether to replace you or await your return.
- (5) **Never Call Our Client Directly.** When you are late, or if you cannot work the prescribed hours or if you won’t be able to report for work, call us.
- (6) **Future Assignments.** If you do not contact us after each assignment, we will assume you are not available for work.

Company Name		Week Ending				
		Sun				
Address		City				
Job Title	P.O.					
Employee Name		Hold My Check		Mail My Check		
Social Security #		Available for Work? Yes No				
Employee Signature		When Available?				
<small>Important for Employee: By executing this form, employee agrees to terms and conditions on reverse side, certifies that this form is true and accurate, and that no injuries were suffered.</small>						
Day	Date	Hours to nearest quarter hour				
		Started	Finished	Less Lunch	Reg Hours	OT Hours
MON.						
TUES.						
WED.						
THURS.						
FRI.						
SAT.						
SUN.						
Minimum Four (4) Hours Per Employee Per Day		Regular		Overtime		
		HRS	MIN	HRS	MIN	
Client: Please write total hours in words to nearest quarter hour above		Total Hours				
PLEASE PRINT NAME (CLIENT)		TITLE				
AUTHORIZED SIGNATURE (CLIENT)		Is this employee continuing this assignment? Yes No				

Important for client: By execution of this form, client certifies that hours shown are correct: work was done satisfactorily, and that client agrees to the terms and conditions on the side of this form. Please draw line through unused spaces above.