

## Employee Application Check List

The following items must be completely filled out and returned with the packet to HR department.

Date last updated: \_\_\_\_\_

Name	
Employment Application	
ESP Services Agency Contractor Guidelines	
ESP Services	
Holiday/Full/Temporary Status Form Pg 1 of 3	
Consumer Report/Background Check Disclosure Notification	
Policy Regarding Illegal Drug Abuse	
Drivers Policy	
Company Credit Card Policy	
ESP Wage Correction Policy	
ESP Services Wage Overpayment/Underpayment Policy	
Wage Deduction Authorization Agreement	
Temporary/Seasonal Employment Notification	
W-4	
Employment Eligibility Verification Form 19	
ADP Time and Labor Management Bookmaking Site	
Employee Quick Reference Card	
ESP Services Blank Timesheet	
Payroll Direct Deposit request and Copy of Voided check...	
Provide a copy of documents from the List of Acceptable Documents 1-9 List A, List B, List C	

Please return this with your paperwork... paperwork can be sent to ESP by FAX 713-715-4706 or -1-88-686-7694

Mail to ESP Services ,5209 Irvington, Houston, Texas 77009

Email to darlenephehan2000@yahoo.com

# ESP SERVICES

ESP Services would like to welcome you and be the first to congratulate you on your new opportunity! As with all new employees we (ESP Services) would like to help you with any questions you might have. Below you will find general administrative information that should make your transition easier. If you have any questions or concerns please call or e-mail us at anytime. We are always eager to assist and answer any questions you might have.

1. Complete application
  2. Copy of Drivers License-----will not receive pay unless this item is turned in
  3. Copy of Social Security Card---- will not receive pay unless this item is turned in
  4. Timesheet attached keep with you
  5. ADP Time and Labor Management
  6. EZLabor online time – Client Name---ESPEnterprisesInc.(please type exactly)
  7. Fax numbers to turn timesheets into 713-715-4706
  8. Email [darlenephehan2000@yahoo.com](mailto:darlenephehan2000@yahoo.com) with any payroll questions or call 713-429-5018
  9. Remember all timesheets must be turned in by Monday by 5pm end of business day. If not turned in on time, you will have to wait until the following week's payroll to process. There will be no exceptions.
- If you need to turn your time into a Supervisors please allow enough time for the supervisor to turn them into the ESP by the deadline.

# Employment Application

Programs, services, and employment are equally available to everyone. Please inform the Human Resources Department if you require reasonable accommodation for the application or interview.

Date of Review (Month/Day/Year)

/ /

Position Applied for:

## APPLICANT DATA

How were you referred to us:

Full Name:

Address:

City:

State:

Zip:

Phone: (     )     )

Mobile/Pager/Other:

E-mail:

Date Available to Start:

Social Security #:

Salary Requirement:

If you are under 18 and we require a work permit, can you furnish one?  Yes  No

If no, please explain:

Have you ever worked for this company?  Yes  No

If yes, when?

Are you a citizen of the United States?  Yes  No

If not, are you legally allowed to work in the United States?  Yes  No

Type of employment desired:  Full-time  Part-time  Temporary  Seasonal

Have you ever pleaded "guilty," "no contest," or been convicted of a crime?  Yes  No

If yes, give dates and details:

Answering "yes" to these questions does not constitute an automatic rejection for employment. Date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be considered.

Driver's license number if applicable to position:

State:

## SUMMARIZE YOUR SPECIAL SKILLS OR QUALIFICATIONS

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**PREVIOUS EMPLOYMENT (Begin with most recent position)**

Dates of Employment: From \_\_\_/\_\_\_/\_\_\_ To \_\_\_/\_\_\_/\_\_\_ Position(s) Held: \_\_\_\_\_

Firm: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: ( \_\_\_ ) \_\_\_\_\_ Supervisor: \_\_\_\_\_ Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Starting Salary and Title: \_\_\_\_\_ Ending Salary and Title: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer for a reference?  Yes  No

Dates of Employment: From \_\_\_/\_\_\_/\_\_\_ To \_\_\_/\_\_\_/\_\_\_ Position(s) Held: \_\_\_\_\_

Firm: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: ( \_\_\_ ) \_\_\_\_\_ Supervisor: \_\_\_\_\_ Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Starting Salary and Title: \_\_\_\_\_ Ending Salary and Title: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer for a reference?  Yes  No

Dates of Employment: From \_\_\_/\_\_\_/\_\_\_ To \_\_\_/\_\_\_/\_\_\_ Position(s) Held: \_\_\_\_\_

Firm: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: ( \_\_\_ ) \_\_\_\_\_ Supervisor: \_\_\_\_\_ Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Starting Salary and Title: \_\_\_\_\_ Ending Salary and Title: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer for a reference?  Yes  No

I certify that my answers are true and complete to the best of my knowledge. I authorize you to make such investigations and inquiries of my personal, employment, educational, financial and other related matters as may be necessary for an employment decision. I hereby release employers, schools or individuals from all liability when responding to inquiries in connection with my application.

In the event I am employed, I understand that false or misleading information given in my application or interview(s) may result in discharge.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

### EDUCATION & TRAINING

#### High School

Name and Address \_\_\_\_\_

Did you graduate?  Yes  No If you did not graduate, list highest grade completed \_\_\_\_\_  
If no, have you passed a high school equivalency (GED) exam?  Yes  No \_\_\_\_\_

#### Technical or Vocational School

Name and Address \_\_\_\_\_

Did you graduate?  Yes  No Attended from \_\_\_\_\_ to \_\_\_\_\_

Degree or Certification: \_\_\_\_\_ Specialty: \_\_\_\_\_

Special honors or awards: \_\_\_\_\_

#### College or University

Name and Address \_\_\_\_\_

Did you graduate?  Yes  No Attended from \_\_\_\_\_ to \_\_\_\_\_

Degree: \_\_\_\_\_ Major: \_\_\_\_\_

Special honors or awards: \_\_\_\_\_

#### College or University

Name and Address \_\_\_\_\_

Did you graduate?  Yes  No Attended from \_\_\_\_\_ to \_\_\_\_\_

Degree: \_\_\_\_\_ Major: \_\_\_\_\_

Special honors or awards: \_\_\_\_\_

### POSITION DETAILS

Position Applying For: \_\_\_\_\_

How did you hear about this job? \_\_\_\_\_

What hours are you willing to work? \_\_\_\_\_

Would you be able to work weekends?  Yes  No

Would you be able to work overtime?  Yes  No

Are you willing to travel for the job?  Yes  No

When would you be able to start? \_\_\_\_\_

Desired salary: \$ \_\_\_\_\_/hour/month/year

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Middle Initial: \_\_\_\_\_

## SKILLS

Please describe any skills you have in the following areas:

Computer: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Languages Spoken (other than English): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Other: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## AUTHORIZATION AND ACKNOWLEDGEMENT

I hereby authorize the release of my records to the following person(s) and I acknowledge that I have read and understand the terms and conditions of this release. I understand that this release is valid for the period of time specified below and that I may revoke this release at any time by notifying the appropriate authority in writing.

Authorized Person(s): \_\_\_\_\_  
Relationship: \_\_\_\_\_  
Date: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_

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**ESP**

**SERVICES**

**Agency Contractor (AC)**

**Assignment Orientation Guidelines**

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## **1 INTRODUCTION**

The procedures found in this ESP Services User Guide are not meant to constitute contractual terms or conditions of employment. The following procedures may be changed, terminated, or adjusted from time to time without prior notice. Should there be any questions or concerns in regard to the policies listed herein, please contact your Supplier for instruction. Employee will sign an employee agreement with specific details on employment.

## **2 AC (EXTERNAL TEMPORARY WORKER)**

Although an AC is not an ESP client employee, the ESP client still controls the means and methods in which the work is performed. Since your assignment is temporary in nature, the ESP client's guidelines require that your employment at the ESP client be limited to no longer than two years of continual assignment, regardless of changes in assignment. You may not return to an ESP client assignment without a three-month separation.

Should the services of a temporary worker no longer be required for any reason, including the completion of the assignment, end of assignment due to business need, or unsatisfactory performance, it will be at the sole discretion of the Assignment Manager to notify ESP of Assignment end.

## **3 TIME REPORTING & PERMISSIBLE PAYMENT PROCESSES**

### **3.1 AC TIME REPORTING**

Timesheets will be filled out weekly and turned into your Cubic supervisor for approval signature. Your supervisor will then fax or email the timesheets to ESP. We encourage the employee to verify ESP received their timesheet every Tuesday morning 713-429-5018.

## **4 AC PAYMENTS**

### **4.1 PAYROLL**

The payment to an AC is the responsibility of the AC's employer. If you do not input your hours into the CTE system you are at risk of not receiving compensation for hours worked. In cases where there is no access to a PC and the Internet, a paper timesheet should be submitted to your supplier for entry into the CTE system

### **4.2 MEETING PAY**

If there is a planned business meeting or event that will require your attendance on a non-scheduled workday or after hours, you will receive payment for a minimum of 1 hour. Should the meeting exceed 1 hour you will receive payment for actual hours in attendance.

### **4.3 ON-CALL PAY (PAGER PAY)**

You are eligible for "On-Call" pay when there is a ESP client business requirement to provide mission-critical production support (e.g. not on scheduled or agreed to assignment hours) via cellular, pager, phones, modems, and/or FAX. Entitlements have been defined as a minimum of 1 hour of "On-Call" pay for coverage Monday through Friday and 2 hours of "On-Call" pay for coverage Saturday and Sunday. Actual work or active support (i.e. troubleshooting on/off ESP client premises, escalations, off-site computer work, etc.) in excess of the minimal coverage defined should be paid as actual hours

### **4.4 OVERTIME PAY**

An ESP client manager in need of additional support must approve overtime pay in advance. Exceptions are granted only when the work is required at the end of regular business day to complete a customer request or other critical task. The ESP client manager must be made aware of situational needs for overtime worked. Exempt level positions will receive an overtime pay of continued straight time. Non-exempt level positions will receive an

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overtime pay of time and a half

**4.5 SHIFT PAYMENT**

The ESP client understands that the payment of shift differentials has been established as an incentive for employees working off shifts. The ESP client understands the need, in many circumstances, to continue this practice and will in effect request that appropriate shift differential pay be awarded to assignments that require non-day working hours. These differentials will be included in the pay rate of the AC during the time that an AC works a regular non-day shift.

**4.6 SHOW-UP PAY**

Should work need be cancelled and you are not notified before the start of a shift (providing you report to work as regularly scheduled) you will receive payment for the actual hours of work performed for Cubic on that shift. If you are contacted prior to the start of your shift and you do not report to work, no payment is due.

Technical problems may occasionally result in prolonged process shutdowns. In these cases, every effort should be made to find other work, including working in other areas or training as needed.

**4.7 SHUTDOWN PAY**

N/A

**4.8 VACATION PAY**

Vacations are awarded according to Supplier benefit policies. All time off should be scheduled two weeks in advance with the ESP client manager and Supplier representative approval. This time frame will allow the ESP client manager to assess the impact on the department and schedule the workload accordingly. The manager may request a short-term replacement if necessary.