



Interested in: Long Term Short Term

Are you legally authorized to work in the United States? Yes No

Have you worked for a temporary service before?
 Yes No Which Services? _____

How did you hear about us? _____

Have you ever been convicted of a felony?
 Yes No Explain: _____

A conviction will not absolutely prohibit employment, but will only be considered in relation to specific job requirements.

LAST NAME	FIRST NAME	INITIAL	DATE
ADDRESS			HOME PHONE
CITY	STATE	ZIP	CELL PHONE
DRIVERS LICENSE #			SSN #
TRANSPORTATION <input type="checkbox"/> OWN CAR <input type="checkbox"/> BUS ROUTE <input type="checkbox"/>			MINIMUM SALARY
CHECK DAYS YOU CAN WORK <input type="checkbox"/> MON <input type="checkbox"/> TUES <input type="checkbox"/> WED <input type="checkbox"/> THUR <input type="checkbox"/> FRI <input type="checkbox"/> SAT <input type="checkbox"/> SUN		CHECK SHIFTS YOU CAN WORK <input type="checkbox"/> FULL TIME <input type="checkbox"/> DAY SHIFT <input type="checkbox"/> DAILY <input type="checkbox"/> PART TIME <input type="checkbox"/> NIGHT SHIFT <input type="checkbox"/> WEEKLY	
EMERGENCY CONTACT PERSON			PHONE NUMBER
FAMILY PHYSICIAN			PHONE NUMBER

CHECK YOUR SKILLS

Assembly	Bindery / Printing	Construction	Food Service	Janitorial
<input type="checkbox"/> Electrical <input type="checkbox"/> General <input type="checkbox"/> Light Industrial <input type="checkbox"/> Mechanical <input type="checkbox"/> Soldering <input type="checkbox"/> Other _____ _____	<input type="checkbox"/> Collating <input type="checkbox"/> Stitching <input type="checkbox"/> Offset <input type="checkbox"/> Screen <input type="checkbox"/> Other _____ _____	<input type="checkbox"/> Demolition / Clean-up <input type="checkbox"/> Concrete <input type="checkbox"/> Drywall <input type="checkbox"/> Framing <input type="checkbox"/> Digging <input type="checkbox"/> Other _____ _____	<input type="checkbox"/> Banquets <input type="checkbox"/> Wait Staff <input type="checkbox"/> Dishwasher <input type="checkbox"/> Cook <input type="checkbox"/> Other _____ _____	<input type="checkbox"/> Commercial <input type="checkbox"/> Floor Buffer <input type="checkbox"/> Housekeeping <input type="checkbox"/> Industrial <input type="checkbox"/> Residential <input type="checkbox"/> Other _____ _____
Machine Operator	Maintenance	Skilled Labor	Warehouse	Other Skills
<input type="checkbox"/> CNC <input type="checkbox"/> Lathe <input type="checkbox"/> Programming <input type="checkbox"/> Set Up <input type="checkbox"/> Sewing <input type="checkbox"/> Other _____ _____	<input type="checkbox"/> Electrical <input type="checkbox"/> Industrial <input type="checkbox"/> Make Ready <input type="checkbox"/> Plumbing <input type="checkbox"/> Residential <input type="checkbox"/> Tools <input type="checkbox"/> Other _____	<input type="checkbox"/> Welding _____ <input type="checkbox"/> Painting _____ <input type="checkbox"/> Woodwork _____ <input type="checkbox"/> Office _____ <input type="checkbox"/> Other _____ _____	<input type="checkbox"/> Dock Work <input type="checkbox"/> Loading / Unloading <input type="checkbox"/> General <input type="checkbox"/> Shipping / Receiving <input type="checkbox"/> Order Pull / Stocking <input type="checkbox"/> Other _____ _____	_____ _____ _____ _____ _____

EMPLOYMENT HISTORY

Company Name	Supervisor	Dates	Duties	Telephone
1.				
2.				
3.				
4.				
Name of School		Subject		Dates
High School/Trade School				
College				

DISPATCH PROCEDURES

1. I understand that I am not required to work on any particular day. Whether I report to a local On Demand office is solely my choice. If I wish to be considered for work, I will visit a local office and sign in or call in by telephone to be placed on a list. On Demand is not required to find work for me, and is not required to contact me in any way to make work available to me. On Demand may assume I am not available for work on any day if I do not visit a local office or call them.

2. If I have a repeat ticket [a request to return to the same job at a later date or time], I know that I must report to the local On Demand office at least 1 hour before the scheduled start time and that if I do not, the On Demand may assume I am not available to return to the job assignment and may fill the request with another worker.

3. I must be on time for my shift and that if I am going to be late, I must inform the office. If I am not able to make it to work, I must inform the office at least 2 hours before the start of my shift. While working at a job site, I may be required to work beyond the anticipated hours. Refusing to do so, would be considered voluntarily walking off the job, being paid at the minimum wage and grounds for termination for On Demand Employment Services.

4. I understand that my employment with On Demand is on a day to day basis. At the end of each day, I will be deemed to have quit unless and until I request to receive a work assignment at a later date or time.

Sign: _____ Date: _____

OFFICE USE ONLY / SOLAMENTE EN LA OFICINA

Reviewed Application _____ Date _____

Keyed in Application _____ Date _____

Authorization to Release Information

On Demand Employment Services has permission to give out any information needed to conduct a criminal investigation to any law enforcement agency or any city, county, state, or federal agency.

Signature _____ Date _____

Consent to send SMS Text

I hereby give On Demand Employment Services permission to send me text messages about all current job openings and all important information from On Demand Employment Services.

Your number will not be used for any marketing scheme.

By signing below, I understand the terms above and if I no longer would like to receive text messages from On Demand Employment Services, I will inform the agency.

Print Name _____

Signature _____ Date _____

Cell Phone Carrier _____

ACCIDENT REPORTING/AUTHORIZATION POLICY

Recognizing that injuries, incidents or near misses occur, On Demand Employment Services follows specific protocol for ALL accident situations involving employees.

All workplace accidents, incidents and/or misses **MUST BE REPORTED IMMEDIATELY** to On Demand Employment Services and your supervisor. This includes **ANY INJURY** no matter how *SLIGHT*. Failure to do so may result in disciplinary actions including termination-as well as, the accident NOT being recognized under Worker's Compensation.

If medical attention is required, you must receive authorization from On Demand Employment Services. Seeking medical attention without our authorization may result in the claim **not being recognized as well as, the bill(s) not being paid by the insurance company-in this case, you could be held financially responsible for medical expenses incurred.**

It is the responsibility of the employee to notify the office. If the injury is so serious the employee cannot communicate with us, then his/her supervisor must notify us so that we may make arrangements for immediate medical treatment. Please contact our office to report the injury as we will instruct you to the nearest approved medical facility. ANY medical treatment that is not arranged and approved in advance by an On Demand representative will **NOT** be covered under worker's compensation.

I hereby authorize all health care providers to disclose and deliver to my employer On Demand, or its representatives, all medical information and records in your possession about my physical condition and treatment. I understand that On Demand without further authorization may re-disclose said information to its legal counsel, insurers or agents. This authorization is effective for 24 [or___] months after the date it is signed. A photocopy or exact reproduction of this signed authorization shall have the same force and effect as this original.

I UNDERSTAND AND AGREE TO ABIDE BY THE TERMS STATED IN THE ABOVE INFORMATION.

Employee Signature

Date

Staffer Signature

Date

RELEASE OF ALL CLAIMS AGAINST CUSTOMERS

I am applying for temporary work assignments with On Demand. I understand that On Demand provides temporary work for its customers to work at the customer's site. In accepting any work assignment, I acknowledge that I am a temporary employee of On Demand and I am not an employee of On Demand's customer.

If I am ever injured in the course of my work I agree that I will only look to On Demands' Workers' Compensation coverage and not to the customer for any recovery. For myself, and on behalf of my heirs, executor, personal representative and assigns, I waive, release and forever discharge any claim that I may now have or that may later develop against any customer of On Demand which directly or indirectly arises out of any injuries which may occur to me while on a work assignment for On Demand.

In signing this release, I understand that I am not waiving or releasing any claims which I may have against the Worker's Compensation coverage provided by On Demand.

Employee Signature _____ **Printed Name** _____ **Date** _____

SAFE WORKER AGREEMENT

On Demand Employment Services, LLC has attempted to make your workplace as safe as reasonably possible. Our safety program needs your involvement to make it successful. By signing below, you will agree to work in a safe manner, follow safety rules, report all unsafe conditions to your supervisor and report all injuries [no matter how minor] to your supervisor.

Employee Signature _____ **Date** _____

NON-COMPETITION, NON-SOLICITATION, AND CONFIDENTIALITY AGREEMENT

THIS AGREEMENT is made and entered into as of this _____ day of _____, 20____ by and between On Demand Employment Services, L.L.C a Kansas Limited Liability Company, having its principal place of business in Kansas, hereinafter referred to as “Employer” and _____, hereinafter referred to as “Employee”.

1. NOW, THEREFORE, in consideration of Employee’s employment and continued employment by Employer, and the wages, salaries and other benefits which will be given to Employee during such time as he/she is employed by Employer, Employee hereby agrees not to disclose confidential information of Employer and agrees that during his/her employment with Employer and for a period of one year after the date Employee’s employment with Employer terminates for any reason whatsoever, whether by Employee or Employer and whether with cause or without cause, including but not limited to termination by Employer or resignation by the employee [the “termination date”], Employee will not directly [or as an employee of another temporary or employee leasing company] work or perform services for or at the facilities of any person, corporation, partnership or other business entity that was a customer of Employer at any time with Employee was employed by Employer or during the one year period prior to Employee signing this Agreement [this includes but is not limited to working or performing services for any customer for whom Employee worked or performed services while Employee was employed by Employer] within the Kansas counties of _____ and the Missouri counties of _____.
2. Employee and Employer acknowledge and agree that this Agreement shall not be interpreted to be an employment contract, but is merely an agreement affecting the disclosure of confidential information and non-competition agreement. Further, nothing contained in this Agreement alters the employment-at-will relationship between the Employee and Employer, nor restricts in any manner the right of Employer to terminate the employment of the Employee, with or without cause, and with or without prior notification.
3. Employee acknowledges that the restrictions contained herein are reasonable, mutually beneficial, and necessary in order to protect Employer’s legitimate business interests because the success of Employer depends to a substantial extent upon recruiting, training [when necessary] and maintaining a group of employees who can be leased or assigned to customers of Employer and because Employer has incurred substantial expense in developing its contacts and relationships with Employer’s customers and Employer’s employees, that any violation of this Agreement would result in irreparable injury to Employer and that Employee therefore acknowledges and agrees that, in the event of any violation hereof, Employer shall be authorized and entitled to obtain temporary, preliminary, and permanent injunctive relief, as well as an equitable accounting of all profits or benefits arising out of such violation, which rights and remedies shall be cumulative and in addition to any other rights or remedies to which Employer may be entitled. If Employee breaches this Agreement, Employee agrees to pay Employer all expenses and costs incurred by Employer, including reasonable attorney’s fees, in enforcing any provision of this Agreement against Employee by suit or otherwise.
4. Each of the parties covenants and agrees that this Agreement is to be construed and government by Kansas Law. The invalidity or unenforceability of any provision or clause of this Agreement shall not affect the continued validity or enforceability of any provision or clause hereof, and this Agreement shall be construed in all respects as if such invalid or unenforceable provision or clause were omitted. If a court of competent jurisdiction should determine that any of the geographic or durational or other provisions of this Agreement are unenforceable because of the scope of such provisions, such court may, in its discretion, modify such provisions in a manner to render them enforceable to the fullest extent permitted by applicable law, and such provisions, as may be modified, shall be fully enforceable as though set forth herein. Any such modification shall not affect the other provisions or clauses of this Agreement in any respect. This Agreement is assignable by Employer but not Employee and may not be modified or amended except by a writing signed by Employer and Employee.

Employee represents that he has read and understands and voluntarily entered into this Agreement.

Date: _____

EMPLOYER

By _____ **Title** _____

Employee: _____

Employee Printed Name: _____

Witnessed By: _____

Witness Printed Name: _____

ON DEMAND HOUSE RULES

PLEASE READ THESE RULES CAREFULLY...IF YOU CANNOT OR WILL NOT COMPLY WITH ALL OF THEM, TELL THE STAFFER NOW!

1. Before accepting a job, I must ask the pay rate and whether it is paid daily or weekly. If it is a weekly position, I will follow the proper procedures in regard to how I will be paid. I will not discuss the pay with anyone at the jobsite.
2. I am expected to work as long as the client needs. I will not ask to leave or tell the client that I have to go to get paid. If I am unable to work past a certain time, I need to tell On Demand BEFORE going to the jobsite.
3. If I am mistreated or asked to do anything dangerous, or if the job or equipment is unsafe, I will tell the client that I must call On Demand immediately.
4. If I can't find a jobsite, I will call On Demand right away. I will not just come back to the office or just no show up at all.
5. If I am asked to come back the next day and I can't return to the job, I will let On Demand know as soon as possible. If I fail to show up, it will be considered as voluntarily quitting a position.
6. If I have the time sheet and there are other people on it, I must bring it back immediately after the job is finished.
7. I must check in with On Demand at least 1 hour before I go to a jobsite. If I don't and I still go out to the jobsite and work, On Demand may not be obligated in paying me for the hours I worked.
8. Tickets must be turned in before 10am to be processed that morning. If not timesheets will be processed after 2pm that afternoon. Weekly tickets should be turned in the following Monday before 10am. Tickets from Sunday will be processed on Monday after 2pm. I am aware that I can pick up my check Mon-Fri 10am to 12pm then 2pm to 6pm. Any work tickets from the weekend must be turned in Monday morning.
9. If I want someone to pick up my check, or have it mailed, I must fill out a check authorization form with a copy of my US or state ID before On Demand can hand out the check. I must provide a US or state ID in order to pick up my check.
10. I must follow On Demand procedures as well as those of the client to where I am sent.
11. Bringing a weapon to On Demand or a client's premises will be grounds for termination.
12. No soliciting/panhandling allowed on premises. Asking to borrow money from a client or On Demand staff is prohibited.
13. Equipment is due back no later than 24 hours after the shift ends. Failure to return issued property to On Demand or the client [within 72 hours after the scheduled shift] may be grounds for termination.
14. Theft of On Demand property or client's property will be grounds for termination.
15. I am aware that if I'm caught altering a work ticket or falsifying a signature on the ticket, it will result in immediate termination.
16. I will not argue with a client or cause any problems at the jobsite, or in On Demand's office. I agree that if I'm sent home early for misconduct, or I walk off a job, I will be automatically terminated from On Demand. I am not to call the client directly. Refusal to sign a corrective action will be grounds for termination.
17. Repeated absences/tardies will result in a corrective action and/or termination. Repeat no call/no shows will result in termination. Receiving 3 DNR's [Do Not Return] will be considered grounds for termination.
18. Employee must update application after one year on non active employment.
19. Sexual harassment is prohibited and is grounds for termination.
20. Use of alcohol/drug use is grounds for termination.
21. You are an employee of On Demand Employment Services, not the client. If you have any questions about any of these rules, ask them now!

Dress Code Policy

Employees are a direct reflection of On Demand to our clients. Certain industries require certain standards and the following are the minimum. Employees must follow the dress code policy. Failure to comply with these rules could result in a corrective action and/or termination.

1. Worn out or torn clothing
2. Revealing attire: clothing such as tank tops, crop tops, short skirts/shorts, sagging pants, or clothing of see through material, or clothes that expose areas of the body.
3. Clothing containing profanity or provocative words or pictures.
4. Sandals or flip flops

Printed Name

Last 4 of SSN

Signature

Date