

Industrial Application



Interviewed by: _____ Registration by: _____ Available Start Date: _____

Company policy and provincial laws prohibit employment discrimination based upon race, ancestry, place of origin, colour, ethnic origin citizenship, creed, sex, sexual orientation, age, record of offences, marital status, family status or handicap.

Desired Position	2nd Choice	Location (City)	Desired Salary/Hourly Rate

What type of work are you looking for? Temporary Permanent Part-time
 Method of transportation? Transit Car Other

Personal Information

First Name _____ Initial _____ Last Name _____ Other Name Used _____

Street Address _____ Suite/Apt _____ City _____

Province _____ Postal Code _____ Closest Main Intersection _____

Home Phone _____ Cell Phone/Pager _____ Other Phone _____

E-Mail Address _____ Emergency Contact Name _____ Emergency Phone Number _____

Social Insurance Number (for payroll purposes) _____

How did you hear about US? Newspaper(Specify) _____ Website (Specify) _____
 Our Employee _____ Other (Specify) _____

Do you have any physical limitations that may affect your ability to perform a particular Job Function? Yes No (Specify) _____

Do you have any Allergies that would affect your ability to perform a particular environment? Yes No (Specify) _____

Have you ever been convicted of a criminal offence for which you have not been granted a pardon? Yes No

Are you at least 18 years of age? Yes No Are you legally eligible to work in Canada? Yes No

What other staffing providers have you worked for? _____

Are you presently employed? Yes No

What types of safety equipment do you own? Steel-toed safety boots Safety Glasses Hearing Protection
 Steel-toed safety shoes other _____

Languages? English Read Write Speak Other (Specify) _____ Read Write Speak
 French Read Write Speak Other (Specify) _____ Read Write Speak

Days Available? Mon Tue Wed Thu Fri Sat Sun

Shifts Available? Days Afternoons Evenings Weekends Are you available on short notice? Yes No

Are you currently interviewing with other companies? Yes No

Administrative Skills? Certification

List your Industrial skills (i.e. Warehouse, Forklift, etc.):	# Of Years	List the Licenses/Certification you have obtained

Employment History (starting with your most recent or Present employer)

Company Name	Start Date	End date
Street Address/ Province/ Postal Code		
Supervisor Name	Phone#	Fax #
Jop Title/ Duties		
Reason for Leaving		Salary/ Hourly Rate
May we contact this employer for a reference? <input type="radio"/> Yes <input type="radio"/> No		

Company Name	Start Date	End date
Street Address/ Province/ Postal Code		
Supervisor Name	Phone#	Fax #
Jop Title/ Duties		
Reason for Leaving		Salary/ Hourly Rate
May we contact this employer for a reference? <input type="radio"/> Yes <input type="radio"/> No		

Personal Information Protection and Electronic Documents Act (PIPEDA)

I acknowledge the Privacy Policy that has been developed to protect the personal information of clients, employees, and staffing services representatives under the Personal Information Protection and Electronic Documents act (PIPEDA) effective January 1, 2004.

I acknowledge my understanding that "personal information" is any information about a person other than his/her name, business title, business address, business e-mail address, business telephone number or business fax number.

I agree to comply with UNITED STAFFING Services. Policies and procedures that protect the privacy of personal information of clients, employees and staffing services representatives.

I agree that I will not, unless authorized by UNITED STAFFING Services. during or at any time after the commencement of employment with UNITED STAFFING Services. or its clients, use, disclose, or aid or abet others to use or disclose any personal information, confidential information, trades secrets, data or other material relating to the business, affairs or property of UNITED STAFFING Services., it's clients, employees, or staffing services representatives directly or indirectly obtained by me during my association with UNITED STAFFING Services. it's employees, it's clients or staffing services representatives.

I agree to forward all inquiries, concerns, or requests related to the collection, use, and disclosure of personal information to the privacy officer of UNITED STAFFING Services.

I consent to work hours in excess of 8 hour per day and 48 hours per week up to a maximum of 60 hours per work week and I agree to work such hours as are scheduled.

I understand that this Agreement is permitted by the Employment Standards Act, 2000.

The provisions of this acknowledgement and acceptance shall survive the termination of the employment relationship,

I have read, agree to, and give my informed consent to all items listed.

Acknowledged and accepted by:

Name of Associate (Please Print)

Signature

Date



**CRIMINAL RECORD CHECK (CRC)
Informed Consent Form**

A. Personal Information	
Surname (last name):	Given names(s):
Surname (last name) at birth:	Former name(s):
Place of birth (City, Province/State, Country):	
Date of birth (YYYY-MM-DD):	Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male
Phone number(s):	Email address:
Current Home Address	
_____	_____
Number	Street
_____	_____
Apartment	City
_____	_____
Province/Territory/State	Postal/ZIP code
_____	_____
Previous Address(es) Within the Last 5 Years (attach additional page if necessary)	
_____	_____
_____	_____
_____	_____
_____	_____
B. Reason for the Criminal Record Check (CRC)	
Reason for Request (example: Employment – Employer – Job Title): Employment, United Staffing Services inc.	
Organization Requesting Search: Triton	
Contact Name:	Contact Phone Number: 416-236-9500
C. Informed Consent	
<p>SEARCH AUTHORIZATION – I HEREBY CONSENT TO THE SEARCH OF the RCMP National Repository of Criminal Records based on the name(s), date of birth and where used, the declared criminal record history provided by myself. I understand that this verification of the National Repository of Criminal Records is not being confirmed by fingerprint comparison which is the only true means by which to confirm if a criminal record exists in the National Repository of Criminal Records.</p>	
<p>POLICE INFORMATION SYSTEM(S) – I HEREBY CONSENT TO THE SEARCH OF police information systems, as part of a Criminal Record and Judicial Matters Check, which will consist of a search of the following systems (check applicable):</p> <p><input checked="" type="checkbox"/> CPIC investigative Data Bank</p>	
<p>AUTHORIZATION AND WAIVER to provide a confirmation of criminal record or any police information.</p> <p>I certify that the information set out by me in this application is true and correct to the best of my ability. I consent to the release of the results of the criminal record checks to <u>Triton Canada Inc.</u>, located in <u>Toronto, Canada</u></p> <p><small>Company Name City and Country</small></p> <p>I hereby release and forever discharge all members and employees of the processing Police Service and the Royal Canadian Mounted Police from any and all actions, claims and demands for damages, loss or injury howsoever arising which may hereafter be sustained by myself as a result of the disclosure of information by the <u>Brockville/Cobourg/OwenSound/NewWestminster/West Vancouver</u> to <u>Triton Canada Inc.</u>, <u>Toronto, Canada</u></p> <p><small>Name of Processing Police Service Company Name City and Country</small></p>	
Signature of Applicant	Date
	Year – Month - Day
	Signed at
	City
	Province/Territory
D. Identification Verification	
<input checked="" type="checkbox"/> Physical Identity Verification <input type="checkbox"/> Electronic Identity Verification	
Witnessing Agent's Name:	Identification Verified: <input type="checkbox"/> Yes <input type="checkbox"/> No
Witnessing Agent's Signature:	Type of Photo ID Viewed (Government Issued) & Secondary ID

Name and location of the company where information will be stored in Canada: Triton Canada Inc. - Toronto, Ontario

****Information related to this criminal record check is collected, retained and disclosed in accordance with applicable privacy legislation. ****

**CRIMINAL RECORD CHECK (CRC)
Declaration of Criminal Record Form**

Declaration of Criminal Record

This form is required to be filled and attached to your Informed Consent Form for a Criminal Record Check (CRC).

Surname (last name) _____ Given name(s) _____ Date of Birth: _____
YYY-MM-DD

Information is collected and disclosed in accordance with federal, provincial and municipal laws.

A Declaration of Criminal Record does not constitute a Certified Criminal Record by the RCMP and may not contain all criminal record convictions.

Applicants must declare all convictions for offences under Canadian federal law.

Do not declare the following:

- A conviction for which you have received a Record Suspension (formerly pardon) in accordance with the *Criminal Records Act*;
- A conviction where you were a "young person" under the *Youth Criminal Justice Act*;
- An Absolute or Conditional Discharge, pursuant to section 730 of the *Criminal Code*;
- An offence for which you were not convicted;
- Any provincial or municipal offence, and;
- Any charges dealt with outside of Canada.

Note that a Certified Criminal Record can only be issued based on the submission of fingerprints to the RCMP National Repository of Criminal Records.

Offence	Date of Sentence	Court Location

Signature of Applicant

Date (YYYY-MM-DD)

United Staffing Solutions - GENERAL INFORMATION



Signing In and Out

You are required to sign both in and out in order to **get paid for the hours you have worked**. Failure to do so will result in you not being paid.

Work Schedule and locations:

It is our intention to make every attempt to provide you with a forty (40) hour work week. However, this would depend on the volume of work throughout our site locations. You may be scheduled to report for work at any of our clients' facilities to ensure a forty (40) hour work week, however, as an Employment agency, we cannot guarantee a forty (40) hours work week and/or work on the same facility.

Pay Days

Automatic Bank Deposit - Your cheque will be automatically deposited into your bank account every Friday. Your pay stub will be mailed/mailed to the last known address we have on file.

Cheque – a cheque will be issued and ready to pick up on Friday (until bank info provided to switch to Direct Deposit).

Vacation

Accrued Vacation pay is paid out twice a year: on last Friday of June and/or Last Friday of November ONLY upon employee's request.

Outside of these Vacation payments, requests for vacation pay will only be accepted if an employee is taking 5 days or more of vacation time at one.

Vacation pay will be paid in full immediately after processing ROE for inactive employees.

Vacation pay request to be submitted at least 2 weeks before the pay day (Last Friday of June and/or Last Friday of November)

The Employment Standards Act calculates pay based on the amount of time have worked:

For employees with less than five years of employment, vacation pay will be 4% of gross wages earned in the 12-month vacation entitlement year / stub period, employees with more than five years of employment have increased to 6% of gross wages in a 12-month or stub period.

Outside of these Vacation payments, requests for vacation pay will only be accepted if an employee is taking 5 days or more of vacation time at one.

Safety Shoes (CSA Approved), PPE and Jewellery

It is mandatory that all employees wear steel toed safety shoes while working. In addition, no jewellery of any kind is to be worn while working.

- Do not wear loose or dangling clothing.

- Personal Protective Equipment (safety glasses, gloves, hairnets, Hard Hat, ID Badge, Safety Vest) will be provided and must be worn, when required.

Reporting of Absences

An employee is required to phone United at least Three (3) hours prior to starting their shift if they are going to be absent from work, or late.

You are to call the **United** at 416-236-9500 and leave a message stating clearly your **Name, ID #, Shift, Date, Site Location, and the reason for your absence**.

In General:

- No one is allowed to leave work areas unless a Supervisor is told, and you are checked.

- United Staffing is Not Responsible For Lost Or Stolen Personal Valuables from you.

- You will not get pay if you left work within the first 3 hours or/and without informing your supervisor and this may cause termination.

- Cell phones are not permitted on the production floor.

Probation Period:

After the start date, new employees are engaged for a three (3) months probationary period. At the end of this period will consider whether the association should be continued. The probationary period shall be deemed to continue beyond the initial probationary period until such time as the employee is notified in writing that he/she is hired.

For the first three months of their probationary period, employees may be dismissed without cause and without notice.

I have read and understand all the above policy _____
Signature Date



Violence and Harassment Policy and Training

UNITED STAFFING SERVICES is committed to provide a workplace that does not tolerate violence in any form from any source.

The management team of UNITED STAFFING SERVICES will respond to every incident of actual or potential violence immediately, in a manner that is proportionate to the seriousness of the situation. Any violent behavior or actions as well as any verbal threat of violence will be taken with the utmost seriousness and can be considered as grounds of dismissal.

Confidentiality:

UNITED STAFFING SERVICES will ensure the confidentiality of the information collected and used in this Policy

This training applies to all employees and persons hired on temporary basis or hired through a temporary help service. It applies not only to incidents which occur at work but may also apply to incidents of violence and the course of an employment relationship involving individuals away from the workplace or outside working hours or in any situation where this protocol can help the employee with the response or solution.

Definitions:

Employee – Includes senior management, full time and term employees, as well as seasonal and casual employees.

Workplace harassment – engaging in a course of vexatious comment or conduct against a worker in a workplace that is known or ought reasonably to be known to be unwelcome

Workplace violence – The exercise, attempt to exercise, or statement or behavior that it is reasonable for the worker to interpret as a threat to exercise physical force by a person against worker, in a workplace, that cause or could cause physical injury to the worker

Workplace – a place where any employee is engaged in work for the company



Health and Safety Policy

Right to Search

This applies to all United Staffing Candidates in all Facilities to ensure the safety of all er

Client reserves the right to conduct bag search to monitor compliance with rules concerning safety of employees, security of company and individual property upon the entrance of the work site and exiting of the facility.

in requesting a search, United is by no means accusing anyone of theft some other crime, or any other variety of improper conduct.

I acknowledge that by signing this acknowledgment, I agree to adhere to the policies as a condition of my employment and/or continuing employment and my failure to adhere to these policies may subject me to disciplinary action, up to and possibly including immediate termination without warning.

Associate Signature

Witness Signature

Date

UNITED STAFFING Services. Hereby agree to all terms on this document.
Reviewed: Oct. 17, 2019 (H.R.)

Procedure – What you need to do if you experience a work place Violence or Harassment:

Incident of Harassment:

Step 1 –Speak with your manager, Teamleader, or another member of the company management team immediately, and contact United Staffing representative, or United Staffing Human Resources **(@ Tel :416-236-9500 / email: operations@unitedstaffing.ca)**

Step 2 – Manager, Team Leader, or management team representative gathers the facts of the incident.

Step 3 – United Staffing identifies lead role, determines action plan, assigns responsibilities and follows up. A file is created containing all the information gathered regarding the incident.

Step 4 – If the Harassment has happened by Clients' employees, Client's HR will be informed, all information will be submitted to support the fact, request a correction action from Client's management.

Step 5 – If the Harassment has happened by one of United Staffing employee, correction action will be taken depends on facts and situation (example, written warning, suspension and or service termination if required).

Incident of Violence

Step 1 – Call the local emergency number (911) or the police if a situation is deemed life threatening or a treat to individual safety.

Step 2 - Then report the incident as described in the Harassment procedure.

Upon investigation of the incident the results will be reviewed and depending on circumstances the appropriate action will be recommended.

Employee Name

Date

Reviewed: Oct. 2019 (H.R.)

UNITED STAFFING



Cost to Confirm Qualifications Agreement:

I acknowledge and agree that any expenses incurred by UNITED STAFFING in verifying my qualifications and/ or fitness to work, such as obtaining a driver's abstract, criminal background check, etc., will be charged back to me. For greater certainty , I Further acknowledge and agree that these are not "fees" pursuant to section 74:8 of the Employment Standards Act, 2000.

I acknowledge and agree that when being placed on assignment through UNITED STAFFING I will abide by the health and safety guidelines, and wear all necessary safety equipment required.

Payroll Deduction Authorization:

Cost of New and replaced Personal protective equipment (PPE) (includes HST) as follow:

- \$6 Safety Glasses
- \$13 Hard Hat
- \$13 Safety Vests
- \$ (add extra charge if required and put initial)

A \$30.00 fee for cost of criminal background check (includes HST)

A \$5 fee for new and replaced photo ID badges (including HST).

If I have not worked the hours to cover the total cost, I agree to reimburse the outstanding balance from my vacation accumulated amount .

Acknowledged and accepted by : _____
Associate Name

Associate Signature

Date



Being registered at UNITED STAFFING I acknowledge and agree that when an assignment is offered to me, I will be provided with name of the agency, the contact information, as well as the name of the client I will be assigned to, their contact information, as well as the wage rate, benefits (if applicable), hours of work, pay period, estimated term of the assignment (if applicable), and general description of the work.

This information will be provided, and in writing as soon as practical thereafter. If I don't receive this information within a reasonable time, I know to contact United Staffing office that I am registered with to request a copy of this information.

I acknowledge and agree that, although I have completed United Staffing application and request for employment, I have not commenced employment. I further acknowledge and agree that the UNITED STAFFING has not yet attempted to assign me to a client and that a UNITED STAFFING Recruiter will contact me when such an attempt is about to be made and then, once I am assigned, my employment with UNITED STAFFING will commence.

I acknowledge and agree that my employment is for a set term which will be verbally given at time of assignment by a UNITED STAFFING Recruiter and that accordingly, at the end of the term my employment will automatically end I will not be entitled to any notice of termination nor pay in lieu of such notice, nor any severance pay, pursuant to contract, statute (including but not limited to the Employment Standards Act, 2000), and the common law.

I acknowledge and agree that if I am unavailable for assignment for 3 assignments in a row, or 6 assignments in any 3 month period I will be deemed to have abandoned my employment and/or there will be just cause for my termination of my employment and I will not be entitled to any notice of termination, nor pay on lieu of such notice, and severance pay (if applicable) pursuant to contract, statute (including but not limited to the Employment Standards Act, 2000) and the common law.

Acknowledged and accepted by : _____
Associate Name

Associate Signature

Date



Health and Safety Policy

Report of Accident / Violence / Harassment

This applies to all United Staffing Candidates in all Facilities to ensure the safety of all employee

All physical injuries and incidents, Violence, and Harassments involving employee shall be reported by the individual(s) involved, or any witnesses before leaving the premises, either to the Supervisor or an authorized representative.

An employee who observes an injury or incident, Violence or Harassment shall report it to the Supervisor or authorized representative, or the Security Officer immediately.

Although many workplace accidents have relatively minor repercussions, which could result in just a paper cut or scratch, others can have more serious.

All the above must be reported to United Staffing immediately for actions.

Accident - a sudden and unforeseen event attributable to any factor which caused:

- (a) An injury to an Employee while he or she was working, and/or
- (b) Material damage to the property.

Associate Signature

Witness Signature

Date

UNITED STAFFING Services. Hereby agree to all terms on this document.

Reviewed: Oct. 17, 2019 (H.

FITNESS FOR DUTY & SUBSTANCE Abuse Policy (Ontario)



Policy Statement

United Staffing Services recognizes that employees who use or are impaired by drugs or alcohol while performing work endanger not only themselves but their co-workers and others affected by the work. United Staffing Services' policy with regard to such conduct is one of zero tolerance and employees must be aware that any violations they commit may result in disciplinary action up to and including termination.

However, United Staffing Services also recognizes that addiction to drugs or alcohol is a serious health problem. The intent of this Policy is to accomplish the health and safety goal in a manner that is fair, humane and consistent with employees' accommodation rights under discrimination laws. The goal is not to punish but help employees identify and get help for their substance abuse issues so that they can return to work healthy, safe, happy and productive.

Purpose

The objective of this substance abuse policy is to ensure that all employees report to work fit for duty. Adopting this Policy is a reasonable precaution that United Staffing Services is required to take to protect the health and safety of workers under Section 25(2)(h) of the Ontario *Occupational Health and Safety Act* (OHS Act).

Scope

This Policy applies to all individuals that work for United Staffing Services including but not limited to full-time, part-time, temporary and contract employees, independent contractors, volunteers and employees of third party contractors or subcontractors that United Staffing Services engages to perform work at its facilities.

Definitions

For the purposes of this Policy:

- "Alcohol" and "Drugs" which include but not limited to:

- o Narcotics and illegal drugs;

- o Marijuana whether used or obtained legally or illegally; and

- o Legal prescription and over-the-counter medications and drugs that cause or have the potential to cause impairment and render an employee not fit for duty.

"Fit for duty" means a state of physical and mental that allows an individual to perform his or her job duties safely and

"On duty" includes reporting for and performing work, including:

- o Scheduled work;

- o Unscheduled call-in work;

- o Work performed on United Staffing Services facilities;

- o Work performed for United Staffing Services away from Company facilities, including but not limited to driving or

"Safety-sensitive job" means positions that have a direct and substantial impact on the health and safety of the

“Substance abuse” means the use of alcohol, illegal drugs, legal marijuana and medications and other substances that

Requirements for Employees

All employees and workers covered by this Policy are required to:

- i. Come to work fit for duty;
- ii. Work safely in accordance with Section 28 of the OHS Act;
- iii. Refrain from using or being impaired by alcohol or drugs while they are on duty;
- iv. Refrain from possessing, purchasing, selling, distributing or engaging in any other conduct involving are on duty;
- v. Refrain from misusing or being impaired by prescription or non-prescription drugs while they are on duty.
- vi. Notify their supervisor if they suspect that a co-worker is unfit for duty; and
- vii. Submit for drug and alcohol testing if required or requested.

Legal Marijuana

A. No Exemption for Legal Marijuana Use

All employees must understand that marijuana is an impairing drug and that using it at work or coming to work high renders them unfit for duty in violation of this Policy. This is true regardless of whether their use of marijuana is legal under federal drug laws.

Legal marijuana use is not a justification for being unfit for work!

B. Employee Duty to Notify

Employees must notify their supervisor if they are using legally prescribed medical marijuana or other legal prescription and non-prescription drugs that may cause impairment for the treatment of a medical condition. Off-duty and legal use of such drugs does not violate this Policy as long as employees are fit for duty at all times when they are on duty.

Support for Employees with Substance Abuse Issues

Although United Staffing Services reserves the right to discipline, it also recognizes that addiction and substance abuse is a health problem. United Staffing Services is prepared to help employees get the counselling, treatment, rehabilitation and support they need to overcome those problems.

Self-Reporting

United Staffing Services strongly encourages employees with substance abuse problems to step forward and request help voluntarily. Employees who do self-report will not be subject to discipline as long as they have complied with their obligation to be fit for duty under this Policy.

Fitness for Duty Medical Assessments

Employees must undergo medical assessments to ensure they are fit for duty before being placed in a safety-sensitive job. Assessments will address substance abuse and be performed:

Prior to employment when individuals are applying for safety-sensitive jobs;

Before current employees are transferred from non-safety-sensitive to safety-sensitive jobs; and

Periodically for as long as the employee remains in a safety-sensitive job.

Medical assessments will be performed by qualified healthcare professionals following appropriate medical practices and results will be kept confidential to the extent required by personal privacy laws.

Disciplinary Investigations

United Staffing Services may open a disciplinary investigation to check whether an employee is engaged in substance abuse or otherwise in violation of his/her fitness for duty obligations under this Policy in response to:

- Complaints or concerns by co-workers, supervisors, etc.;
- Declining performance;
- Erratic behavior;
- Involvement in safety incidents including near misses;
- Arrests for impaired driving, drug offences and similar violations; and
- Other indications that the employee has substance abuse issues or is otherwise not fit for duty.

Investigations will be carried out in accordance with United Staffing Services' Disciplinary Investigation Procedures.

Drug & Alcohol Testing

Employees may be tested for alcohol and Supervisors will escort employees to the screening site for testing. Refusal to submit to testing will be grounds for immediate termination under this Policy.

Privacy

United Staffing Services recognizes that test results and related information is protected personal information under privacy laws and will keep it confidential and secure and refrain from using or disclosing it except as permitted or required by law.

Consequences of Violations

Violation of this Policy is grounds for discipline up to and including termination in accordance with the United Staffing Services Progressive Discipline Policy.

Assistance & Reinstatement

United Staffing Services reserves the right to place employees with substance abuse issues on administrative leave and enter into Last Chance Agreements offering them the opportunity to return to work if they successfully complete the terms of their treatment and rehabilitation program, pass drug and alcohol tests and meet other conditions of reinstatement.

Employee Right to Accommodations

United Staffing Services recognizes that drug and alcohol addiction is deemed a disability under the

Ontario Human Rights Code. Accordingly, in administering the disciplinary and other provisions of this Policy, addictions and other substance abuse related to disabilities, such as use of medical marijuana or prescription drugs for chronic pain and debilitating conditions, will be treated as non-culpable violations and employees will be offered reasonable accommodations based on their individual circumstances and capabilities to the point of undue hardship and the availability of work within clients.

Name

Signature

Date

Revised: Jan, 2023 (H.R.)

Employee safety during emergencies



At United Staffing Services, we take employee safety seriously.

If you have a disability, whether permanent or temporary, and may need help during an emergency, please let us know. We will ask you to complete a self-assessment form, then work with you to develop individualized emergency response information that will meet your needs in an emergency.

Please note that we do not need to know the details of your medical condition or disability, only the kind of help you may need.

The information you provide will be kept confidential and only shared with your consent.

If you have questions or you already have emergency response information and need to adjust it, **please let me know now**.

Signature: _____

Date: _____

Consent to Release of Personal and/or Private Information Waiver and Release

I have applied / working for a position United Staffing Services and recognize that I am required to furnish information to be used to determine my qualifications, and suitability for employment with United Staffing and any of their clients.

I consent to the collection, use, disclosure, transmittal and examination of all information compiled by United Staffing Services

Personal information about me that is obtained during the Applying process, or any subsequent training and employment, may be disclosed to any law enforcement agency, or any client for the purposes for which it was obtained or for any other reason.

I agree to waive any right of action against any person or organization provided information or opinions in compliance with this authorization.

I agree to e-transfer my personal information by email/fax/text or any required media, between myself and United Staffing, and/or between United staffing and any client or organization that required for work purpose, United Staffing will not responsible for any data breach might be happening during the process.

I hereby acknowledge and declare the terms of this authorization for release of information are fully understood by me.

Personal Information can include:

Copy of SIN & Government Issued photo ID

Copy of Criminal Background Check / Consent of Criminal Record

All GMP, Health and Safety, Orientations and signed United Policies.

Copy of Signed United Application.

Applicant Signature

Date:

UNITED STAFFING



SERVICES

United Staffing Services

3359A Bloor St. West Etobicoke, Ontario M8X 1G2

WHMIS QUIZ

BASIC LEVEL



Name: _____

Date: _____

Use info sheet, Information on Poaster Board, and Booklets

Name:	Test Start:	Test End:
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You have 20 minutes to complete all exercises. If you are unclear of any instructions please ask for help.

<p>1 . What does WHMIS stand for?</p>
<p>2. What three methods does WHMIS use to inform workers of the hazards at the producuts that they work with?</p> <p>(a) communications, Protection, Disposal. (b) The MSDS, Training, Labeling. (c) Working, Labeling, Protecting. (d) Pouring Mixing, Cleaning up.</p>
<p>3. WHMIS informs workers of the hazards associated with?</p> <p>(a) Controlled products such as chemicals and biohaazards. (b) Controlled products such as chemicals and biohaazards and drugs. (c) All hazardous materials. (d) Hazardous materials and equipment.</p>
<p>4. What is a material safety data sheet?</p> <p>(a) A product that must be used safely. (b) A label that details the hazards of a products. (c) A technical document that details, among other things, the properties, contents precautions and safe handling procedures of controlled products. (d) A documents that details how to use a product, including how to apply the product, how to mix the product, etc.</p>
<p>5. A Material safety data sheet mustbe less than how old?</p> <p>(a) 1 Year (b) 3 Year's (c) 5 Year's (d) It doesn't matter</p>

6. What information would you expect to find on a MSDS? Check all the that apply.









- (a) Product Information.
- (b) Hazardous Ingredients.
- (c) Physical Data.
- (d) Responsibilites.
- (e) Fire and Explosion Data.
- (f) Reactivity Data.
- (g) Toxicological Properties.
- (h) Preventative Measures.
- (i) First Aid measures.
- (j) Shift Schedules.
- (k) Preparation information

7. Answer the following true or false.

TRUE	FALSE	The MSDS sheets can be kept in an office and locked up.
TRUE	FALSE	All containers of controlled products should have WHMIS labels.
TRUE	FALSE	If I pour some chemical from a large container into a small container, the smaller container will need a workplace label.
TRUE	FALSE	To label a container of controlled product, it's adequate to write the name of the product on the bottle.
TRUE	FALSE	If my department orders a new WHMIS controlled product, Ontario health and Safety Association needs to be notified.
TRUE	FALSE	Ontario health and safety Association is the only place to obtin a workplace label.
TRUE	FALSE	It is good practice to store containers of different WHMIS classes separately.
TRUE	FALSE	After this quiz, I'm fully WHMIS trained and can handle any controlled product safely.

8. Match the WHMIS hazard symbol with the correct WHMIS class.

Write the correct WHMIS class beside the WHMIS symbol.

Symbol	Answer	Class/Description
	_____	C Oxidizer. These materials may make fires burn more vigorously and should not be stored with combustibles.
	_____	B Flammable and combustible. These materials present a fire hazard.
	_____	D3 Poisonous and infections, Biohazardous infections. Examples include Disease causing viruses and bacteria.
	_____	A Compressed Gas. Substance under pressure. May explode if improperly handled.
	_____	F Dangerously Reactive. A violent reaction occur if this material is heated or subject shock.
	_____	E Corrosive. May causes serious burns to the skin, eyes and respiratory tract.
	_____	D2 Poisonous and infections, causing other toxic effects. May cause chronic or long-term injury such as cancer or organ damage.
	_____	D1 Poisonous and infections, Immediate and serious toxic effects. These materials may cause short-term or acute, irreversible damage to tissues, or immediately life threatening injury.

TEST: WHMIS 2015 (GHS) SUPPLEMENT

This supplement is designed for workers who have previously completed a WHMIS 1988 course.

Completion and documentation of this WHMIS 2015 (GHS) Supplement will ensure that workers' training is up-to-date and that employers are compliant with the standards in Canada's Hazardous Products Act (HPA), and the new Hazardous Products Regulations (HPR).

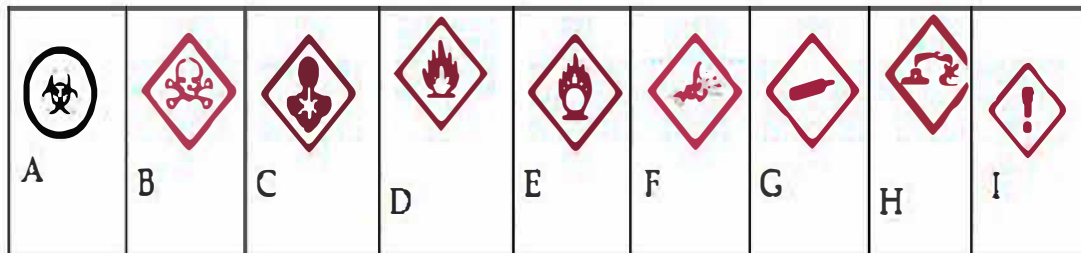
1. WHMIS provides information to workers about hazardous materials through which of the following method(s)?
 - a) Supplier & Workplace labels
 - b) Safety Data Sheets
 - c) Worker education & training
 - d) All of the above

2. Which of the following are potential effects of a health hazard? Select all that apply.
 - a) Explosive
 - b) Aspiration Hazard
 - c) Respiratory or Skin Sensitization
 - d) Flammable
 - e) Carcinogenicity

3. A simple asphyxiate hazard is defined as:
 - a) A finely divided solid material that can catch fire or explode
 - b) A substance or mixture that displaces oxygen in the atmosphere
 - c) A gas that spontaneously ignites in the air
 - d) A substance or chemical that poses acute toxicity

4. A pyrophoric gas:
 - a) Causes oxygen deprivation
 - b) Causes skin corrosion or irritation
 - c) Spontaneously ignites in air at or below 130 degrees Fahrenheit
 - d) Emit flammable substance when in contact with water

5. Match the WHMIS 2015 hazard pictogram with the correct category below:



1.1 Flammables (gases, aerosols, liquids, solids); Pyrophoric (liquids, solids, gases); Self-reactive substances and mixtures; Self-heating substances and mixtures; Substances and mixtures which, in contact with water, emit flammable gases, organic peroxides

1.2 Oxidizing (liquids, solids, gases)

1.3 Gases under pressure

1.4 Carcinogenicity; Germ cell mutagenicity; respiratory sensitization; reproductive toxicity; Specific target organ toxicity - single exposure; Specific target organ toxicity - repeated exposure; Aspiration hazard

1.5 Corrosive to metals; Skin corrosion; Serious eye damage

1.6 Self-reactive substances and mixtures, Organic peroxides

1.7 Acute toxicity (oral, dermal, inhalation; fatal or toxic)

1.8 Acute toxicity (harmful); Skin irritation; Eye irritation; Skin sensitization; Specific target organ toxicity - single exposure (respiratory irritation or drowsiness or dizziness)

1.9 Biohazardous infectious material

6. A signal word on a shipping label:
 - a. Describes the nature of the hazards of the product
 - b. Alerts the reader quickly to the severity of the chemical's hazard
 - c. Explains how to handle the chemical safely
 - d) Is always accompanied with a pictogram
7. Workplace labels are required when:
 - a. Products are transferred from its original supplier container into another container
 - b. The supplier label is missing or illegible
 - c. The product is produced in the workplace
 - d. All of the above
8. A Safety Data Sheet (SDS) is available in the workplace to:
 - a. Assist the purchasing department in buying chemicals
 - b. Describe workplace policy
 - c. Provide detailed hazard and safety information about a controlled product
 - d. None of the above
9. Which of the following SDS sections describes emergency procedures, protective equipment and how to contain and cleanup a spill or release?
 - a. First Aid Measures
 - b. Accidental Release Measures
 - c. Handling and Storage
 - d. Exposure Controls/Personal Protection
10. If you are working with a chemical and need to find out about the routes of exposure, as well as the short and long term effects of exposure, where on the SDS would you look?
 - a. Section 2: Hazard Identification
 - b. Section 8: Exposure Controls / Personal Protection
 - c. Section 11: Toxicological Information
 - d. Section 16: Other Information

UNIT 8: QUIZ "TEST YOUR KNOWLEDGE"

Name: _____

Date: _____

		True	False
1.	Under the Accessibility for Ontarians with Disabilities Act 2005, different standards on accessibility are being developed that will set requirements for the identification, removal, and prevention of barriers for people with disabilities in key areas of daily living.	<input type="checkbox"/>	<input type="checkbox"/>
2.	The customer service standard is a voluntary standard. Your business or organization can decide whether or not to put it into practice.	<input type="checkbox"/>	<input type="checkbox"/>
3.	The term "disability" only applies to people who use wheelchairs.	<input type="checkbox"/>	<input type="checkbox"/>
4.	Avoiding someone because of their disability is a barrier in attitude.	<input type="checkbox"/>	<input type="checkbox"/>
5.	Your organization must accept feedback about the way it provides goods or services to people with disabilities.	<input type="checkbox"/>	<input type="checkbox"/>
6.	You should not ask your customer to repeat himself if you don't understand him the first time. It might offend him.	<input type="checkbox"/>	<input type="checkbox"/>
7.	If a person has vision loss they cannot see anything.	<input type="checkbox"/>	<input type="checkbox"/>
8.	It's helpful for someone who uses a hearing aid if you reduce background noise.	<input type="checkbox"/>	<input type="checkbox"/>
9.	You should always speak directly to your customer, not to their support person or companion.	<input type="checkbox"/>	<input type="checkbox"/>
10.	If your customer uses a manual wheelchair, feel free to push them around your store.	<input type="checkbox"/>	<input type="checkbox"/>
11.	You can always tell when someone has a disability.	<input type="checkbox"/>	<input type="checkbox"/>
12.	Assistive devices enable a person with a disability to do everyday tasks and activities.	<input type="checkbox"/>	<input type="checkbox"/>
13.	Your organization must allow people with disabilities who use a support person to bring their support person with them while accessing goods or services on parts of the premises that are open to the public.	<input type="checkbox"/>	<input type="checkbox"/>
14.	Service animals should be treated as pets.	<input type="checkbox"/>	<input type="checkbox"/>
15.	Perimeter Institute's Accessibility Policy is built upon the principles of Dignity, Independence, Integration and Equal Opportunity.	<input type="checkbox"/>	<input type="checkbox"/>
16.	Perimeter Institute does not offer a discounted admission fee to support persons attending events to assist a disabled patron.	<input type="checkbox"/>	<input type="checkbox"/>

Associate Acknowledgement



I have read and understand UNITED STAFFING Services. Policies as noted in UNITED STAFFING application I have asked any questions and I am satisfied with explanations given to me. I understand that the opportunity to refer to the Occupational Health and safety act at any time.

I acknowledge that I have access to the full Health and Safety/Operations Manual to review any policy in full. I will review the hazards of an assignment with the consultant and/or supervisor prior to accepting the assignment.

I acknowledge that all the information given on my application form or resume is true and accurate. I give the employer permission to verify all statements and call any employer for reference information. Failure to provide accurate information may result may result in termination with cause.

I have thoroughly reviewed specifically, the following policies and understand that this information is available to me in the OHSP Manual:

- Harassment / Violence Policy and training (available in different languages if required)
- Right to refuse unsafe work and your rights
- Accident Reporting/ Early and safe return to the workplace/ First aid procedures
- WHMIS Awareness, AODA training, 4-steps MOL Awareness training
- Drugs and Alcohol in the Workplace
- Joint Health and Safety Reps (information to be provided by clients)
- Forklift Procedure/Machine Operation (UNITED STAFFING associates are not permitted to operate any lift equipment unless specifically assigned by UNITED STAFFING Services following a theory test.)
- Excess of hours and Overtime Contract for Associates.
- Criminal Record verification and release of Personal Information Consent forms
- All Health and Safety Policies (Report of Accident, Right to search, Fitness for Duty, young workers, emergency plan)

As a UNITED STAFFING Services associate, I will:

- Always check and ask if a machine has proper guarding as per the Occupational Health & Safety Act.
- Ask for training at the employer/client site for any work I am not trained to do and will advise UNITED STAFFING Services if asked to perform a job to which I have not been assigned.
- Upon arrival, ask for the location of the MSDS, First Aid, and inquire about the employer site emergency procedures.

Name of Associate (Please Print)

Date

Associate Signature

Witness Signature

Vulnerable Worker

I fall under the vulnerable worker category - section 23. (for example, I am under 24 years of age.

Yes No

I, the consultant, identify this individual to be a vulnerable worker based on the criteria outlined in section 23.

Yes No

If yes, what steps were taken to provide additional guidance? _____

United Staffing Services

Workplace Recording Devices & Smart Glasses Policy

1. Purpose

This policy protects the privacy, confidentiality, and security of employees, clients, and business operations by prohibiting unauthorized recording devices in the workplace.

2. Policy Statement

United Staffing strictly prohibits the use of Meta smart glasses and any wearable or portable devices capable of recording audio, video, or images while performing work duties or while on company or client premises, unless written authorization is provided by senior management.

3. Prohibited Devices Include (but are not limited to):

- Meta smart glasses (e.g., Ray-Ban Meta or similar)
- Smart eyewear capable of audio or video recording
- Body-worn cameras or covert recording devices
- Recording pens or hidden cameras
- Mobile phones or tablets used to record without permission
- Any device capable of capturing confidential workplace information

4. Scope

This policy applies to all employees, temporary workers, contractors, and representatives of United Staffing while:

- On United Staffing premises
- On client sites
- During work-related travel
- Acting on behalf of United Staffing

5. Prohibited Actions

Employees are strictly prohibited from:

- Recording coworkers, clients, or visitors without consent and authorization
- Secretly recording workplace conversations
- Using Meta glasses or similar devices during work hours
- Sharing or storing unauthorized recordings

6. Enforcement

Violation of this policy may result in disciplinary action up to and including termination of employment and possible legal action.

7. Employee Acknowledgment

I acknowledge that I have read and understand the United Staffing Workplace Recording Devices Policy and agree to comply with its requirements.

Employee Name: _____

Signature: _____

Date: _____