

**ORIENTATION SHEET**  
**SAUNDERS STAFFING, INC./PERSONNEL POOL OF VA., INC.**

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

COORDINATOR: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_

COMPANY ASSIGNED TO: \_\_\_\_\_

DIRECTIONS: \_\_\_\_\_  
\_\_\_\_\_

SUPERVISOR: \_\_\_\_\_ START DATE: \_\_\_\_\_

LENGTH OF ASSIGNMENT: \_\_\_\_\_ HOURS: \_\_\_\_\_ RATE OF PAY: \_\_\_\_\_

LUNCH: \_\_\_\_\_ PARKING: \_\_\_\_\_

ATTIRE: \_\_\_\_\_ STEEL TOED SHOES REQUIRED: \_\_\_\_\_

I HAVE RECEIVED TIME CARD INSTRUCTIONS: \_\_\_\_\_ YES \_\_\_\_\_ NO

I HAVE BEEN MADE AWARE THAT ALL TIME CARDS ARE DUE ON A WEEKLY BASIS ON MONDAY BY 5:00 P.M. I UNDERSTAND THAT IF MY TIME CARD IS LATE MY CHECK WILL BE DELAYED. \_\_\_\_\_ YES \_\_\_\_\_ NO

I HAVE RECEIVED SAFETY ORIENTATION: \_\_\_\_\_ YES \_\_\_\_\_ NO

I HAVE BEEN MADE AWARE THAT I MAY NOT LIFT MORE THAN 40 TO 50 POUNDS.  
\_\_\_\_\_ YES \_\_\_\_\_ NO \_\_\_\_\_ NOT APPLICABLE

PAYDAY IS:  Every Friday  Every Other Friday MY FIRST PAYDAY IS: \_\_\_\_\_

CHECK HANDLING:  PICK UP – BLUEFIELD  MAIL  DIRECT DEPOSIT  
 PAY CARD

**IF YOU CAN NOT REPORT TO WORK – DO THE FOLLOWING:** Call your supervisor and coordinator as soon as possible. Failure to show up for work or call in may jeopardize your assignment and future assignments.

**IF THERE ARE ANY CONCERNS ABOUT THE ASSIGNMENT DO THE FOLLOWING:** Call your coordinator as soon as possible. No concern is too small.

MISCELLANEOUS INSTRUCTIONS: \_\_\_\_\_  
\_\_\_\_\_

**I acknowledge and understand the above information and instructions.**

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date