



Name: JAYNE SIPIN

Taborca ID: 1645P

Date of Hire: 5/3/2018

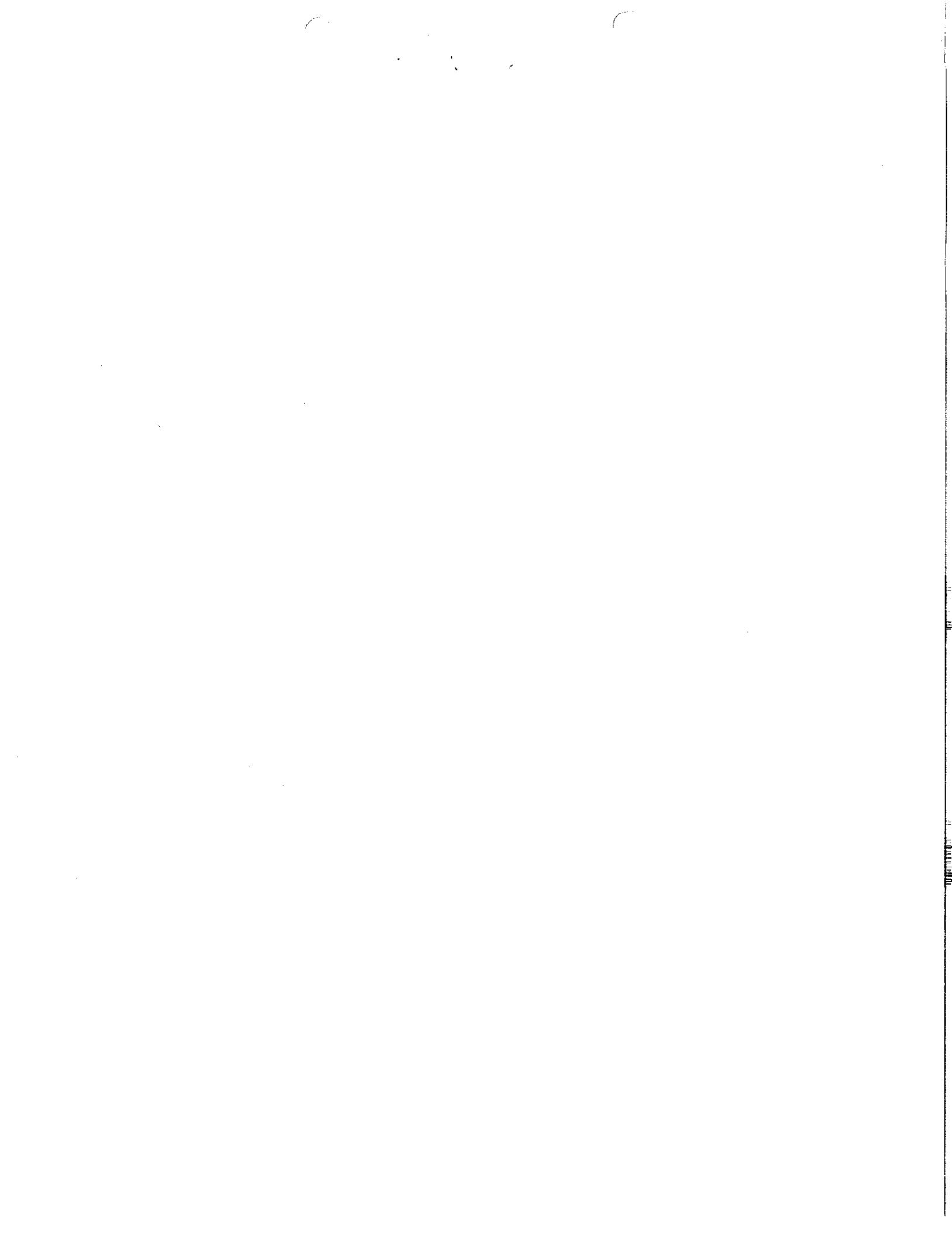
Date of Re-Act: / /

New employee set up

- E-verify
- Hire Right EE
- Hire Right Internal (upload any list A docs)
- Direct Deposit (Scan to Payroll) and/or Global Cash Card – complete the form & have EE sign
- Notice to Employee Completed
- Added to Orientation Time Sheet
- Attended New Hire Orientation
- Background Check (Asurint)
- New Hire List (All fields)
- Check Taborca Profile (All fields)
- Upload Resume and Skills Tests (one doc)
- Upload Food Handler's Card

Re Act employee set up (See Re Act Process for more detail)

- File and I9 pulled (new one created/done in Hire Right if old ones are gone)
- Re Act onboarding if initially hired before 1/1/16
- Check W4
- Check all demographic info and availability
- Check for skills tests, app, FHC, and resume (get new app, new resume if hired more than 1 year ago)
- Complete Notice to Employee with updated pay if necessary
- Verify pay option and take steps to Re Act any old pay options still current
- Run new BGC if more than 1 year since last shift worked
- New orientation/place on time sheet if it's been over a year since last shift
- New Hire List (all fields)
- Delete employee from the INA/TER spreadsheet if they are on it



NOTICE TO EMPLOYEE*Labor Code section 2810.5***EMPLOYEE**

Employee Name: Jayne Spin
Start Date: _____

EMPLOYER

Legal Name of Hiring Employer: S.E Scher

Is hiring employer a staffing agency/business (e.g.; Temporary Services Agency; Employee Leasing Company; or Professional Employer Organization [PEO])? Yes No

Other Names Hiring Employer is "doing business as" (if applicable):

Acrobat Outsourcing

Physical Address of Hiring Employer's Main Office:

665 Third St. Suite 415, San Francisco, CA. 94107

Hiring Employer's Mailing Address (if different than above):

Hiring Employer's Telephone Number: 415-431-8826

If the hiring employer is a staffing agency/business (above box checked "Yes"), the following is the other entity for whom this employee will perform work:

Name: _____

Physical Address of Main Office: _____

Mailing Address: _____

Telephone Number: _____

WAGE INFORMATION

Rate(s) of Pay: _____ Overtime Rate(s) of Pay: _____

Rate by (check box): Hour Shift Day Week Salary Piece rate Commission

Other (provide specifics): _____

Does a written agreement exist providing the rate(s) of pay? (check box) Yes No

If yes, are all rate(s) of pay and bases thereof contained in that written agreement? Yes No

Allowances, if any, claimed as part of minimum wage (including meal or lodging allowances):

(If the employee has signed the acknowledgment of receipt below, it does not constitute a "voluntary written agreement" as required under the law between the employer and employee in order to credit any meals or lodging against the minimum wage. Any such voluntary written agreement must be evidenced by a separate document.)

Regular Payday: FRIDAY

WORKERS' COMPENSATION

Insurance Carrier's Name: Integro USA Inc. dba Integro Insurance Brokers

Address: 1 State Street Plaza, 9th floor, New York, NY, 10004

Telephone Number: 212-295-5440

Policy No.: LDC4042609 AOS

Self-Insured (Labor Code 3700) and Certificate Number for Consent to Self-Insure: _____

PAID SICK LEAVE

Unless exempt, the employee identified on this notice is entitled to minimum requirements for paid sick leave under state law which provides that an employee:

- a. May accrue paid sick leave and may request and use up to 3 days or 24 hours of accrued paid sick leave per year;
- b. May not be terminated or retaliated against for using or requesting the use of accrued paid sick leave; and
- c. Has the right to file a complaint against an employer who retaliates or discriminates against an employee for
 1. requesting or using accrued sick days;
 2. attempting to exercise the right to use accrued paid sick days;
 3. filing a complaint or alleging a violation of Article 1.5 section 245 et seq. of the California Labor Code;
 4. cooperating in an investigation or prosecution of an alleged violation of this Article or opposing any policy or practice or act that is prohibited by Article 1.5 section 245 et seq. of the California Labor Code.

The following applies to the employee identified on this notice: (Check one box)

1. Accrues paid sick leave only pursuant to the minimum requirements stated in Labor Code §245 et seq. with no other employer policy providing additional or different terms for accrual and use of paid sick leave.

2. Accrues paid sick leave pursuant to the employer's policy which satisfies or exceeds the accrual, carryover, and use requirements of Labor Code §246.

3. Employer provides no less than 24 hours (or 3 days) of paid sick leave at the beginning of each 12-month period.

4. The employee is exempt from paid sick leave protection by Labor Code §245.5. (State exemption and specific subsection for exemption): _____

ACKNOWLEDGEMENT OF RECEIPT

(Optional)

Monica Cheung
(PRINT NAME of Employer representative)

05/03/2018
(SIGNATURE of Employer Representative)

(Date)

Jayne C. Phu
(PRINT NAME of Employee)

05/3/18
(SIGNATURE of Employee)

(Date)

The employee's signature on this notice merely constitutes acknowledgement of receipt.

Labor Code section 2810.5(b) requires that the employer notify you in writing of any changes to the information set forth in this Notice within seven calendar days after the time of the changes, unless one of the following applies: (a) All changes are reflected on a timely wage statement furnished in accordance with Labor Code section 226; (b) Notice of all changes is provided in another writing required by law within seven days of the changes.

Interview Note Sheet

Applicant Information

Name: JAYNE SIPIN
 Date: 5-3-2018
 Position (s) Applied for:
 DISH / PREP / SERVER

Interviewer: SONNY

Rate of Pay: DISH 15.50 / PREP 16 / SERVER 15.50

Referred by:

LIONEL OCHOA

Test Scores

| | | | | | | |
|------------|----|-----|--------|--------------|-----|---|
| Server | 31 | 135 | 88.5 % | Bartender | 130 | % |
| Prep Cook | 17 | 20 | 85 % | Barista | 10 | % |
| Grill Cook | | 40 | % | Cashier | 10 | % |
| Dishwasher | 9 | 10 | 90 % | Housekeeping | 16 | % |

Seeking

Full-Time

Part-Time

Relevant Experience / Summary of Strengths

Knife Skills

Total of _____ in Food Service

CURRENT:

SANTA CLARA COUNTY
HOSPITAL

Cuisines

- 1 - Prep
- 2 - DISH
- 3 - FSW

Stations:

- 1
- 2
- 3

P.O.S. Experience: Y / N details: _____

Transportation

Car

Public Transit

Carpool (Rider / Driver)

Regions Available to work:

SF City

SF North

SF Peninsula

East Bay

Outer East Bay

San Jose

South San Jose

SJ Peninsula

Certifications (if any)

TIPS

Serv-Safe

LEAD

Other _____

Will Submit

Availability

Open

AM only

PM only

Weekdays only

Weekends only

Details:

SUN - TUE 3:45 - 7:45 pm NA

No SAT

Uniforms Owned:

Bistro

Black Bistro

Tuxedo

1/2 Tuxedo

Black Vest

Long Black Tie

Chef Coat

Chef Pants

Knives

Black Pants

Non-Slip Shoes

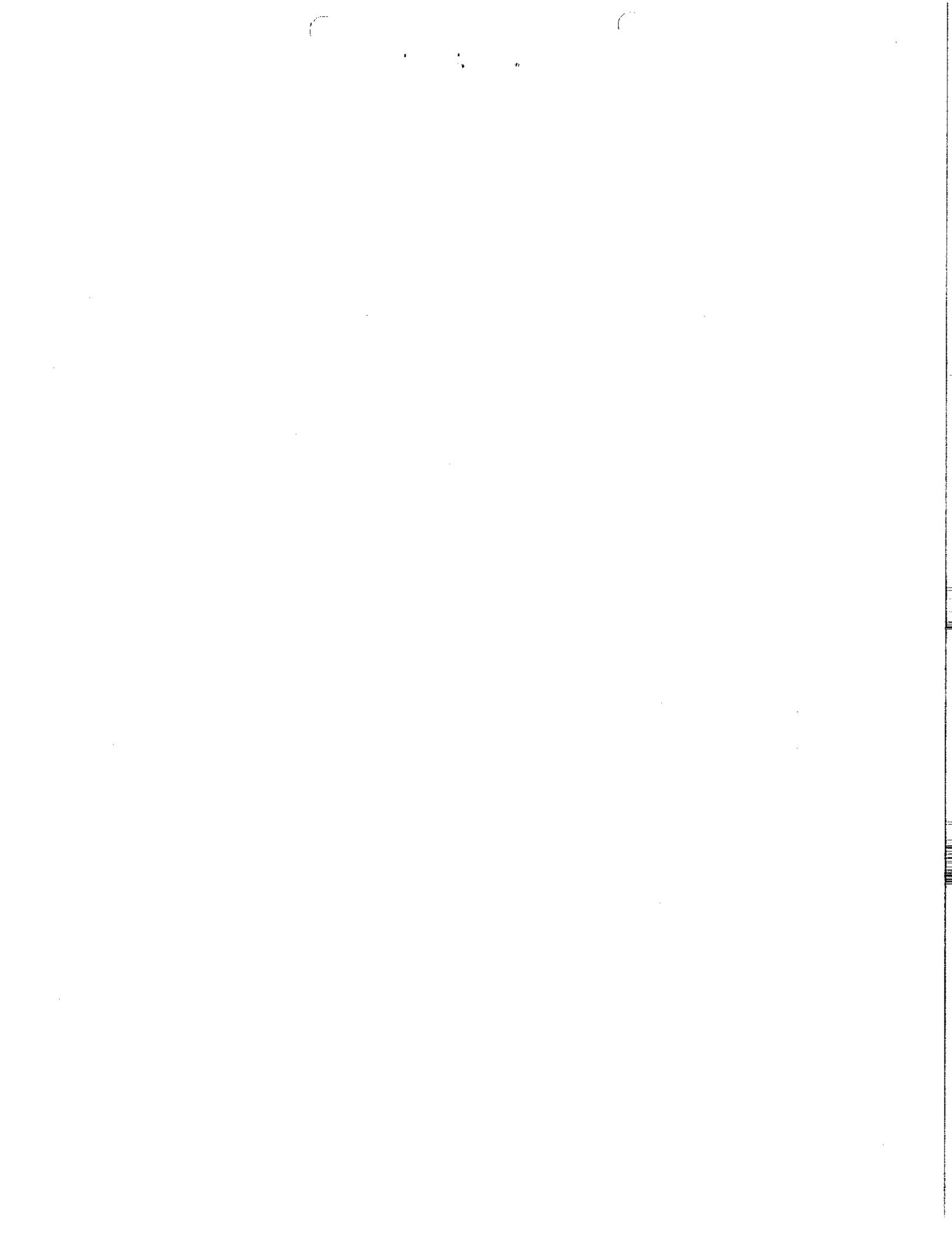
Bow Tie

Other: _____

Would you recommend this applicant for Acrobat Academy?

Convention Candidate?

Other Languages Spoken:



Acrobat

outsourcing
Your Hospitality Staffing Professionals

Employment Application

Acrobat Outsourcing is an equal opportunity employer dedicated to non-discrimination in all employment practices. Acrobat Outsourcing selects the best qualified individual for the job based on job-related qualifications regardless of race, age (40+), color, religion, gender, national origin, ancestry, marital status, sexual orientation, disability or any other status protected by applicable law.

PLEASE PRINT

Full Name Jayne Sipin Date: 5/3/18
 Home Telephone () Other Telephone (408) 706-3596
 Present Address 1445 Golden Lake Rd. San Jose, CA 95131
 Permanent Address, if different from present address: _____
 Email Address Sipinj@gmail.com

EMPLOYMENT DESIRED

Position applying for: server/dish prep Salary desired: negotiable

Are you currently registered with any staffing and/or employment agencies? If so, please list
no

Are you applying for: Full-time work? Yes No Part-time work? Yes No

Temporary work, e.g., summer or holiday work? Yes No From: _____ To: _____

How did you find out about our open position? (Please check fill in proper name of source):

Referral Name of Referral Lionel Achda Newspaper Job Fair Agency Company Website

Other Web Posting Other Source

Could you work overtime, if necessary? Yes No If hired, on what date could you start working? Immediately

Some days yes, some days no

Please keep in mind that schedules and shifts may vary depending on position and season. Additionally, the hours may vary from week to week, depending on the company needs. Please list only the times/days you're available to work below.

| SPECIFY HOURS AVAILABLE DAILY | SUNDAY | MONDAY | TUESDAY | WEDNESDAY | THURSDAY | FRIDAY | SATURDAY |
|-------------------------------------|--------|--------|---------|-----------|----------|--------|----------|
| AM | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ? |
| PM | | | | ✓ | ✓ | ✓ | ? |

Do you have any vacations or extended leaves planned in the next 12 months? If so, please list dates:

PERSONAL INFORMATION

Have you ever applied to or worked for Acrobat Outsourcing before? Yes No If yes, when? _____

Do you have friends or relatives working for Acrobat Outsourcing? Yes No If yes, please state name and relationship _____

If hired, would you have a reliable means of transportation to and from work? Yes No

If hired, can you present evidence of your legal right to live and work in this country? Yes No

State age if you are under 18 _____. If you are under 18, hire is subject to verification that you are of minimum legal age to work.

Are you able to perform the essential functions of the job for which you are applying? Yes No

If no, describe the functions that cannot be performed. (Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions.) _____

Pursuant to any and all Fair Chance Ordinances, we will consider for employment qualified applicants with arrest and conviction records.

EDUCATION & SKILLS

| NAME OF SCHOOL | CITY & STATE | GRADE OR DEGREE COMPLETED | DID YOU GRADUATE? |
|--|--------------|---------------------------|-------------------|
| Foothill High School | San Jose, CA | 12 H.S. Diploma | yes |
| Do you have any special licenses, certificates or special training? If so please list under "Special". | | YES | NO |
| Are you computer literate? If so, list software knowledge under "Special." | | YES | NO |
| Are you proficient with Point of Sales Systems? If, so please list which ones under "Special." | | YES | NO |
| Do you have any other experience, training, qualifications or special skills, which you feel make you especially suited for work at Acrobat Outsourcing? If so, please list under "Special." | | YES | NO |
| Special: <i>Years of experience in customer service, Food service, and clerical training in MS word, Excel, and powerpoint</i> | | | |

EMPLOYMENT HISTORY

List below all present and past employment starting with your most recent employer (last 10 years is sufficient). Account for unemployment periods of three months or more.

Are you currently employed? Yes No If so, may we contact your current employer? Yes No

Name and Address of Employer *County of Santa Clara 751 S. Bascom Ave. 95120*

Type of Business *Kitchen/Hospital* Telephone No. *(408) 885-6688* Supervisor's Name *Abel Hernandez*

Your Position and Duties *Food service worker. Food prep, Dishwashing, serving, cashier, Tray passing, Tray line*

Dates of Employment: From *5/2017* To *Present*

Reason for Leaving: *not leaving, part time/extra help Employee*

Name and Address of Employer *Jack in the Box*

Type of Business *Restaurant* Telephone No. *()* Supervisor's Name *Anne Moreno*

Your Position and Duties *Cashier; Take orders, Handle register, count money, Food prep*

Dates of Employment: From *10/2015* To *5/2017*

Reason for Leaving: *other Employment*

Name and Address of Employer *TGIF Fridays*

Type of Business *Restaurant* Telephone No. *()* Supervisor's Name *Diane*

Your Position and Duties *Hostess/Server; Greet all seat guests; take orders, served Food & drinks to customers/guests*

Acrobat

outourcing

Your Hospitality Staffing Professionals

Dates of Employment: From 9/2011 To 6/2015

Reason for Leaving: Restaurant closed down

Name and Address of Employer AMC Theatres

Type of Business Movie Theater Telephone No. (312) 555-1234 Supervisor's Name DAVE

Your Position and Duties Usher / cashier / concessions worker; directed guests to proper theater, cleaned theaters, sold tickets, food prep

Dates of Employment: From 3 2004 To 5 2007

Reason for Leaving: Other Employment

Have you ever been fired from any previous place of employment? If so, please explain: no

MILITARY SERVICE

Have you obtained any special skills or abilities as the result of service in the military? Yes No
If so, describe: _____

JOB RELATED REFERENCES

List below three persons not related to you who have knowledge of your work performance within the last three years

Name: Chenji BOSSIERE Telephone No. (408) 959-0515

Address 19068 Dalton Dr. Malibu, CA 90235

Occupation: WOKER Relationship: Spouse Number of Years Acquainted: 32

Name: _____ Telephone No. (_____) _____

Address 50 North B Street San Mateo, CA 94401

Occupation: Washington worker Relationship: Friend Number of Years Acquainted: 12

Name: Maria Flores Telephone No. (460) 509-2977

Name: Momia Flores Telephone No. (460) 509-2977

Address 134 S. Whisman, San Jose CA 95127

Occupation: receptionist Relationship: friend Number of Years Acquainted: 11

Please Read Carefully, Initial Each Paragraph and Sign Below

B I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material facts on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

S I hereby authorize Acrobat Outsourcing to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

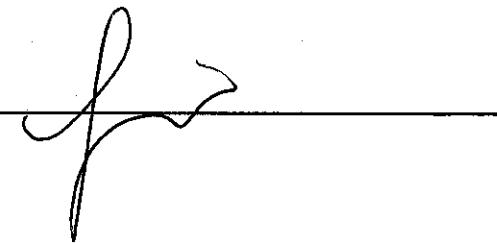
B I hereby authorize Acrobat Outsourcing and its authorized representatives to solicit information regarding my background, which may include but not be limited to, information about my employment, education, and/or criminal history, which may be in the files of any federal, state, or local criminal justice and law enforcement agency and general public records history.

S I understand that if selected for hire, it will be necessary for me to provide satisfactory evidence of my identity and legal authority to work in the United States, and that federal immigration laws require me to complete an I-9 form in this regard within three days of my hire date.

S Acrobat Outsourcing is an at-will employer. I understand that nothing contained in the application, or conveyed during any interview, which may be granted or during my employment, if hired, is intended to create an employment contract between me and the company. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, with or without cause, at the option of either myself or the company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the company's designated representative.

I hereby acknowledge that I have read and understand the above statements.

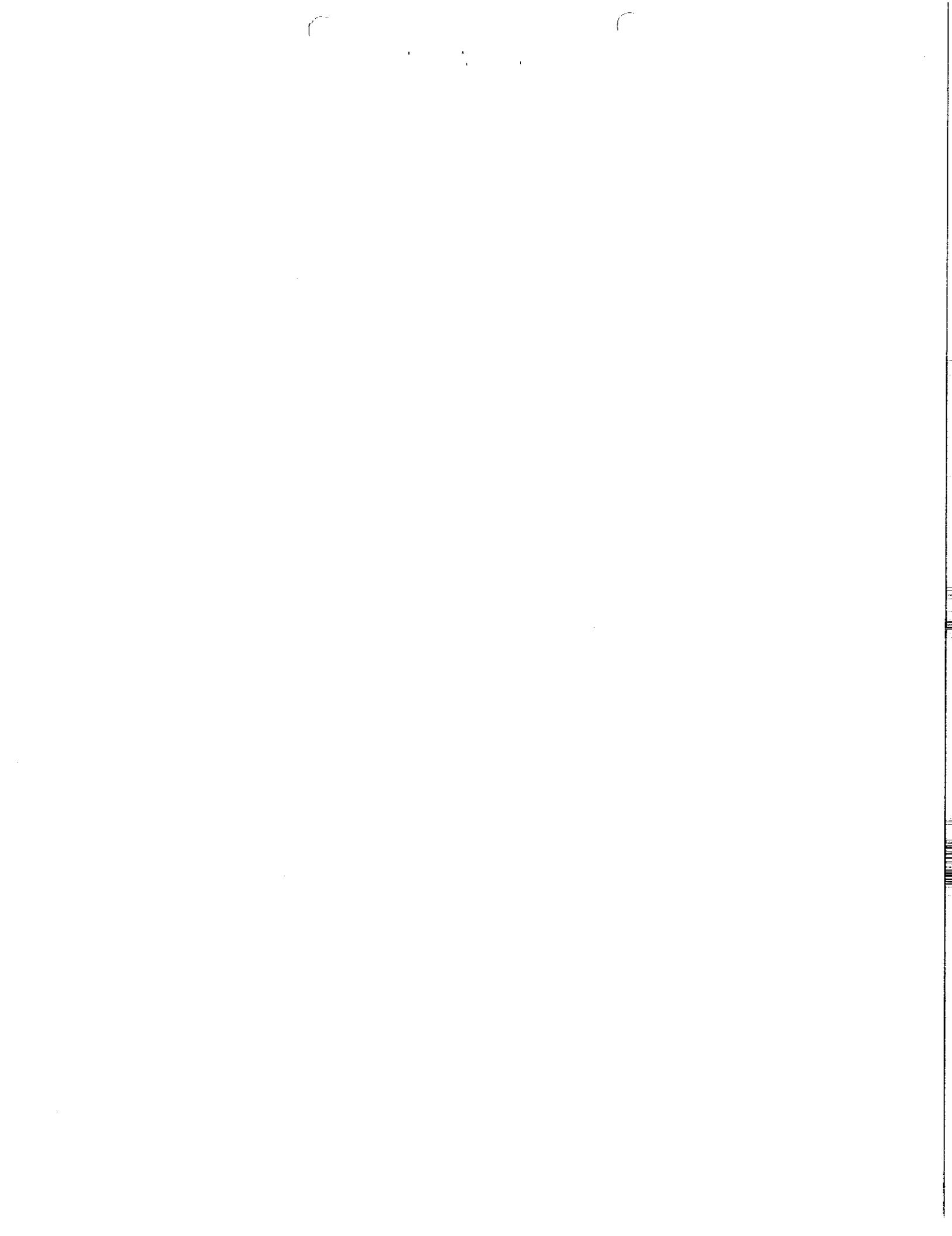
Applicant's Signature



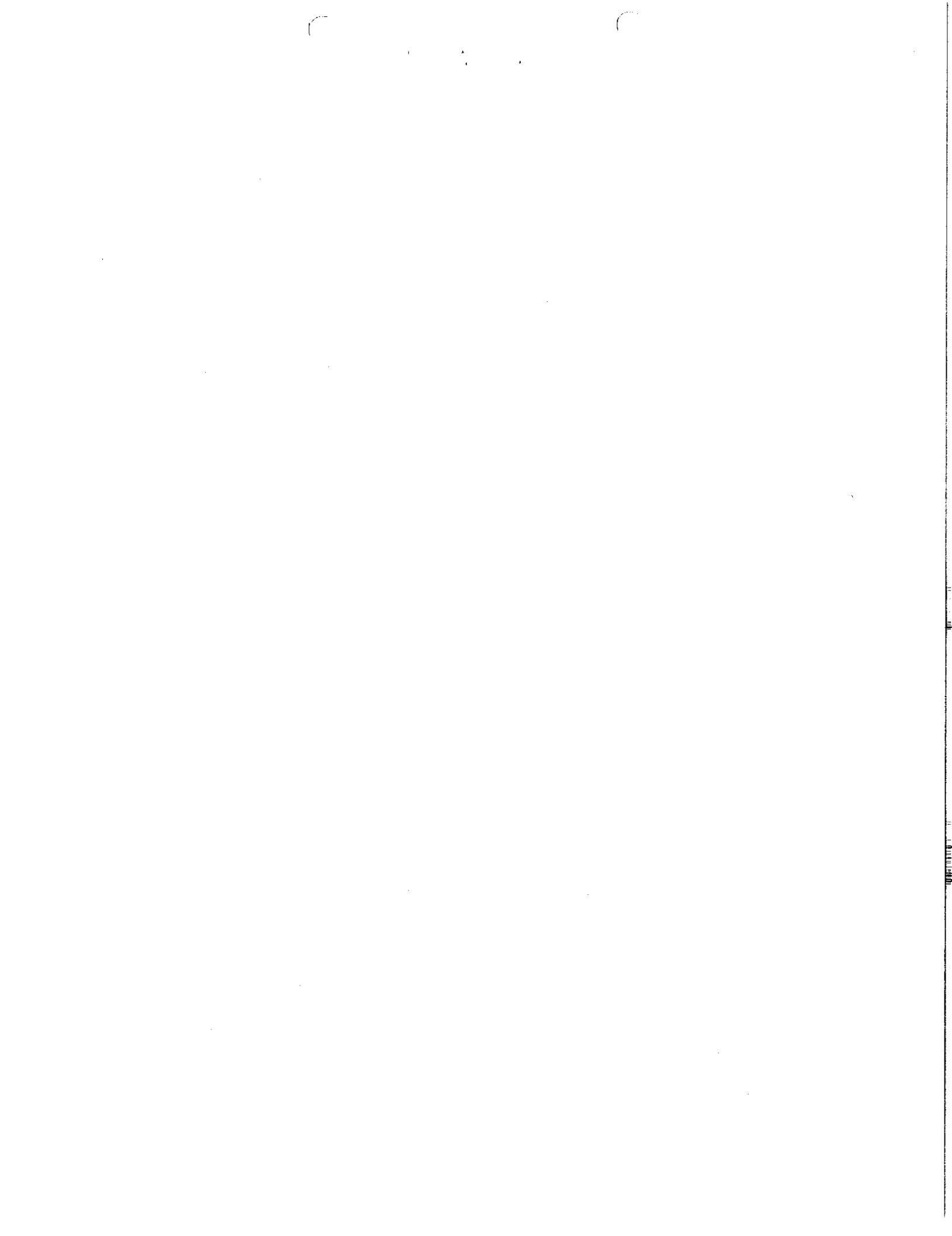
Date

5/3/14

- Referral
- If you were referred, please tell us by whom:
Lionel Ochoa
- What days/times can you work? Select all that apply:
 - Monday AM
 - Tuesday AM
 - Wednesday AM
 - Wednesday PM
 - Thursday AM
 - Thursday PM
 - Sunday AM
- Have you ever applied to or worked for Acrobat before?
No
- If hired, would you have reliable means of transportation to and from work?
Yes
- If hired, can you present evidence of your legal right to live and work in this country?
Yes
- Are you able to perform the essential functions of the job for which you are applying?
Yes
- Name of School
Foothill High School
- City & State
San Jose, Ca
- Grade/Degree
High School Diploma
- Graduated?
Yes
- Do you have any special licenses? (If so, label under "Special")
No
- Are you computer literate? (If so, label which programs under "Special")
Yes
- Are you proficient with Point of Sale systems? (If so, label which under "Special")
No
- Do you have any experience, training, qualifications or special skills? (If so, label under "Special")
Yes
- Special:



- **Submission Date**
04-30-2018 22:24:24
- **IP**
73.222.173.140
- **First Name**
Jayne
- **Last Name**
Sipin
- **E-mail Address**
sipinj@gmail.com
- **Phone**
4087063596
- **Address**
1495 Goldenlake Rd
- **Unit or Number**
N/A
- **City, State**
San Jose, Ca
- **Zip Code**
95131
- **What region(s) are you applying to work within?**
 - San Jose
- **Which position(s) are you applying for?**
 - Server
 - Busser
 - Housekeeper
 - Dishwasher
 - Barista
- **Are you applying for:**
 - Part-Time
- **When can you start?**
 Tuesday, May 01, 2018
- **Can you work overtime?**
Yes
- **How did you hear about us?**



Food Service and Customer Service training and experience
Microsoft Word, Excel, and PowerPoint

- **Are you currently employed?**

Yes

- **Can we contact your current employer?**

Yes

- **Name and Address of Employer**

County of Santa Clara
751 S. Bascom Ave.
San Jose, Ca 95128

- **Type of Business**

Hospital

- **Phone Number**

4088856688

- **Your Position & Duties**

Food Service Worker I
Food prep, dishwashing, customer Service, cashier

- **Date of Employment (from/to):**

5/30/17-Present

- **Reason for Leaving**

Not leaving; Extra Help Employee

- **Still Employed:**

Yes

- **Have you ever been fired from a previous place of employment? If yes, please explain:**

No

- **First Name**

Cheryl

- **Last Name**

Boissiere

- **E-mail Address**

chef.cher@yahoo.com

- **Phone**

4088590515

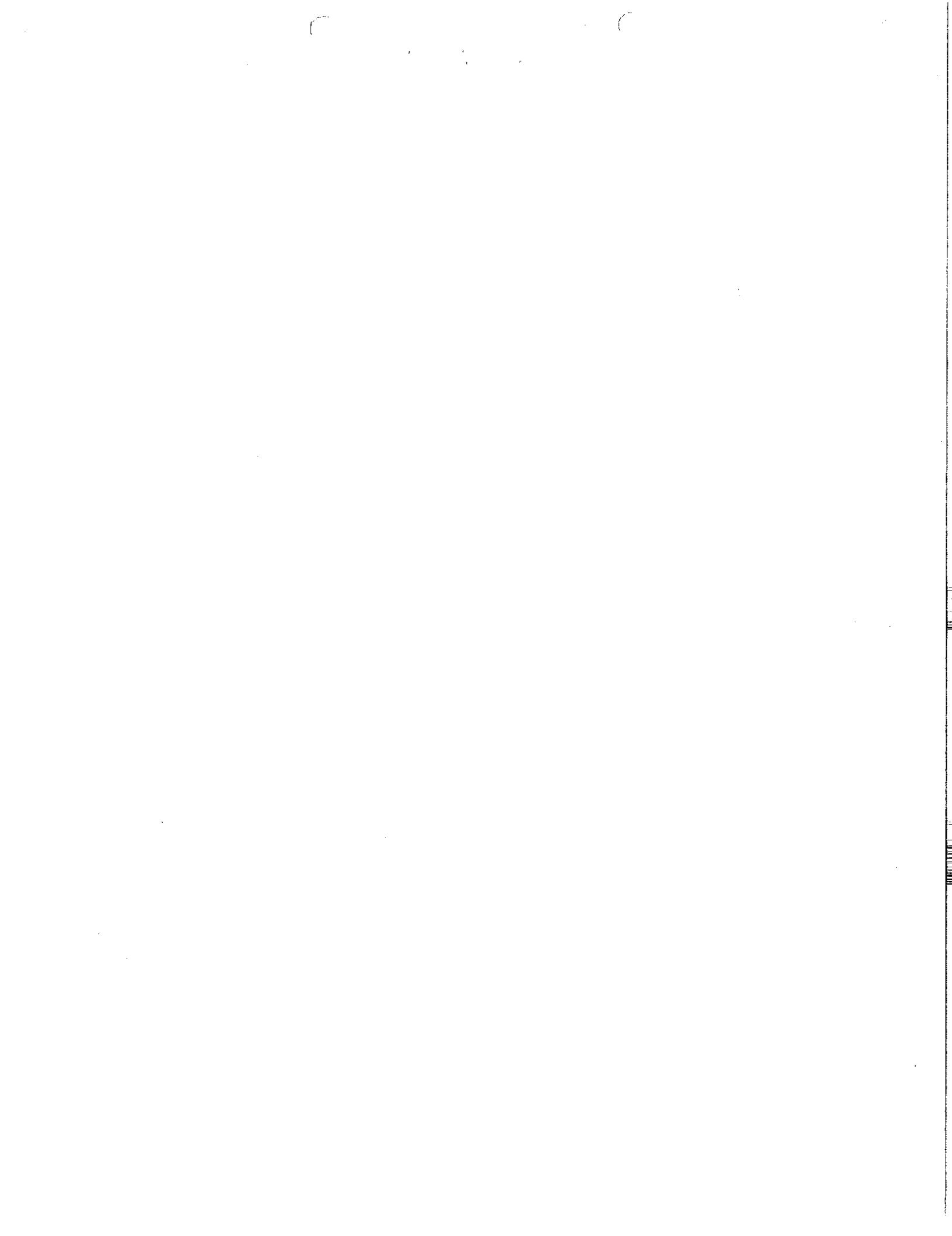
- **Relationship:**

Aunt/Supervisor

- **Years Acquainted:**



- I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material facts on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.
 - (Checked box indicates acknowledgement)
- I hereby authorize Acrobat Outsourcing to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.
 - (Checked box indicates acknowledgement)
- I hereby authorize Acrobat Outsourcing and its authorized representatives to solicit information regarding my background, which may include but not be limited to, information about my employment, education, and/or criminal history, which may be in the files of any federal, state, or local criminal justice and law enforcement agency and general public records history.
 - (Checked box indicates acknowledgement)
- I understand that if selected for hire, it will be necessary for me to provide satisfactory evidence of my identity and legal authority to work in the United States, and that federal immigration laws require me to complete an I-9 form in this regard within three days of my hire date.
 - (Checked box indicates acknowledgement)
- Acrobat Outsourcing is an at-will employer. I understand that nothing contained in the application, or conveyed during any interview, which may be granted or during my employment, if hired, is intended to create an employment contract between me and the company. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, with or without cause, at the option of either myself or the company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the company's designated representative.
 - (Checked box indicates acknowledgement)
- I hereby acknowledge that I have read and understand the above statements.
 - (Checked box indicates acknowledgement)
- **Applicant Digital Signature (Type Name):**
Jayne Sipin
- **Date:**
 Monday, April 30, 2018



Servers Test

Multiple Choice

A

1) Food is served on what side with what hand?

- a) On the left side with the left hand
- b) On the left side with the right hand
- c) On the right side with the left hand
- d) On the right side with the right hand

D

2) Drinks are served on what side with what hand?

- a) On the left side with the left hand
- b) On the left side with the right hand
- c) On the right side with the left hand
- d) On the right side with the right hand

D

3) Food and drinks are removed on what side with what hand?

- a) On the left side with the left hand
- b) On the left side with the right hand
- c) On the right side with the left hand
- d) On the right side with the right hand

A

4) What part of a glass should you handle at all times?

- a) The stem
- b) The widest part of the glass
- c) The top

D

5) When you are setting a dining room how should you set up your tablecloths?

- a) Neatly and evenly across the tables
- b) The creases should all be going in the same directions
- c) The chairs should be centered and gently touching the table cloth
- d) All of the above

D

6) If you bring the wrong entrée to a guest what should you do?

- a) Go back into the kitchen and patiently wait in line behind the rest of the servers until it's your turn
- b) Inform the guests that you will bring the correct entrée once everyone else in the dinning room is served
- c) Try to convince the guests to eat what you brought them
- d) Go back into the kitchen to the front of the line and inform the expeditor that you need a different entrée

Match the Correct Vocabulary

D

Scullery

A. Metal buffet device used to keep food warm by heating it over warmed water

C

Queen Mary

B. Style of service where food is prepared or served individually at the dinner table to fit the customer's specific taste (i.e. providing dressing and pepper for salad or handing out bread to each patron)

A

Chaffing Dish

C. Used to hold a large tray on the dining floor

B

French Passing

D. Area for dirty dishware and glasses

G

Russian Service

E. Large metal shelving unit for prepared food to be held or for dirty trays to be stored

F

Corkscrew

F. Used to open bottles of wine

E

Tray Jack

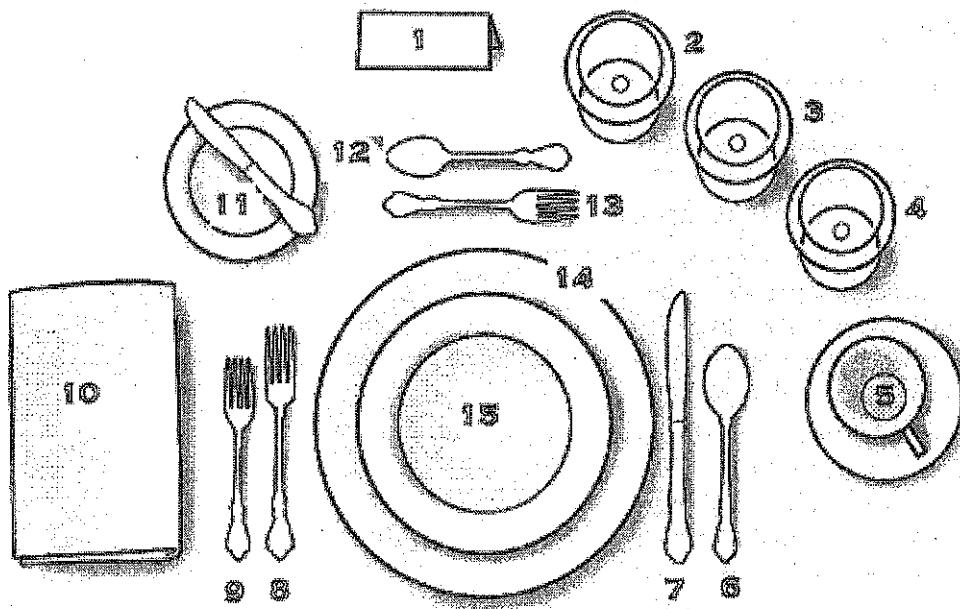
G. Style of dining in which the courses come out one at a time

Name

Hayne Spin

Score / 35

Servers Test



Match the Number to the Correct Vocabulary

| | | | |
|-----------|-----------------------|-----------|------------------------------|
| <u>10</u> | Napkin | <u>9</u> | Dinner Fork |
| <u>11</u> | Bread Plate and Knife | <u>5</u> | Tea or Coffee Cup and Saucer |
| <u>1</u> | Name Place Card | <u>7</u> | Dinner Knife |
| <u>12</u> | Teaspoon | <u>2</u> | Wine Glass (Red) |
| <u>13</u> | Dessert Fork | <u>14</u> | Salad Fork |
| <u>6</u> | Soup Spoon | <u>1</u> | Service Plate |
| <u>15</u> | Salad Plate | <u>3</u> | Wine Glass (White) |
| <u>4</u> | Water Glass | | |

Fill in the Blank

1. The utensils are placed _____ inch(es) from the edge of the table.
2. Coffee and Tea service should be accompanied by what extras? SUGAR and CREAMER
3. Synchronized service is when: service at the same time
4. What is generally indicated on the name placard other than the name? Table number
5. The Protein on a plate is typically served at what hour on the clock? 6:00
6. If a guest asks for a specialty dinner (i.e. Gluten-Free or Vegetarian) you should do what immediately? discuss menu items that fit their preference

Multiple Choice (1 point each)

D

1) A gallon is equal to _____ounces

- a. 56
- b. 145
- c. 32
- d. 128

C

2) Mesclun are what type of vegetable?

- a. Roots
- b. Beans
- c. Salad Greens
- d. Spices

B

3) What does the term braise mean?

- a. Sear quickly on both sides
- b. Slowly cook in covered pan with little liquid
- c. Cook on high heat and quickly
- d. Slowly cook in simmering water

B

4) At what internal temperature must chicken be cooked so that it is safe to eat?

- a. 155 degrees F
- b. 165 degrees F
- c. 175 degrees F
- d. 185 degrees F

A

5) How do you blanche vegetables?

- a. Immerse for a short time in boiling water
- b. Cook lightly in butter over med heat
- c. Soak in cold water overnight
- d. Rub with salt before cooking

C

6) Which of the following ingredients would you pack before measuring?

- a. Olive Oil
- b. Salt
- c. Brown Sugar
- d. White Sugar

A

7) What is Al Dente?

- a. Firm but not hard
- b. Soft to the touch
- c. Very hard
- d. Very soft

C

8) Food should be left out no more than

- a. 2 hours
- b. 3 hours
- c. 4 hours
- d. 5 hours

Prep Cooks Test

A /

9) Which is the improper way to thaw frozen food?

- a. In the fridge
- b. In a sink with cold water
- c. On the counter
- d. In the microwave

A /

10) Which of the following can you use to put out a grease fire?

- a. Baking Soda
- b. Baking Powder
- c. Flour
- d. Water

B /

11) What is the temperature range of the danger zone?

- a. 25-135
- b. 40-140
- c. 50-160
- d. 30-130

D /

12) Which of the following is listed from smallest to largest?

- a. Dice, chop, mince
- b. Mince, chop, dice
- c. Chop, dice, mince
- d. Mince, dice, chop

C /

13) Which direction should pan handles be turned while cooking on the stove?

- a. Over the fire at all times
- b. Turned towards you for better control
- c. Turned towards the right or left at all times
- d. Over the countertop at all times

C /

14) When you poach something, you cook it with what?

- a. Noodles
- b. Vegetables
- c. Liquid
- d. Oil

A /

15) Which spoon is used to remove fat from soups and stews

- a. Basting Spoon
- b. Ladle
- c. Slotted Spoon
- d. Portion Spoon

E /

16) Which of the following means to cook in a small amount of fat?

- a. Season
- b. Sauté
- c. Broil
- d. Boil
- e. Fry

A

17) What is a Julien cut?

- a. Food cut into long thin strips, matchstick
- b. Food cut into long thin strips then turned and cut into a 1/8" dice
- c. Food diced into finely chopped and uniform pieces
- d. Cutting and peeling into oblong seven sided football like shapes

A

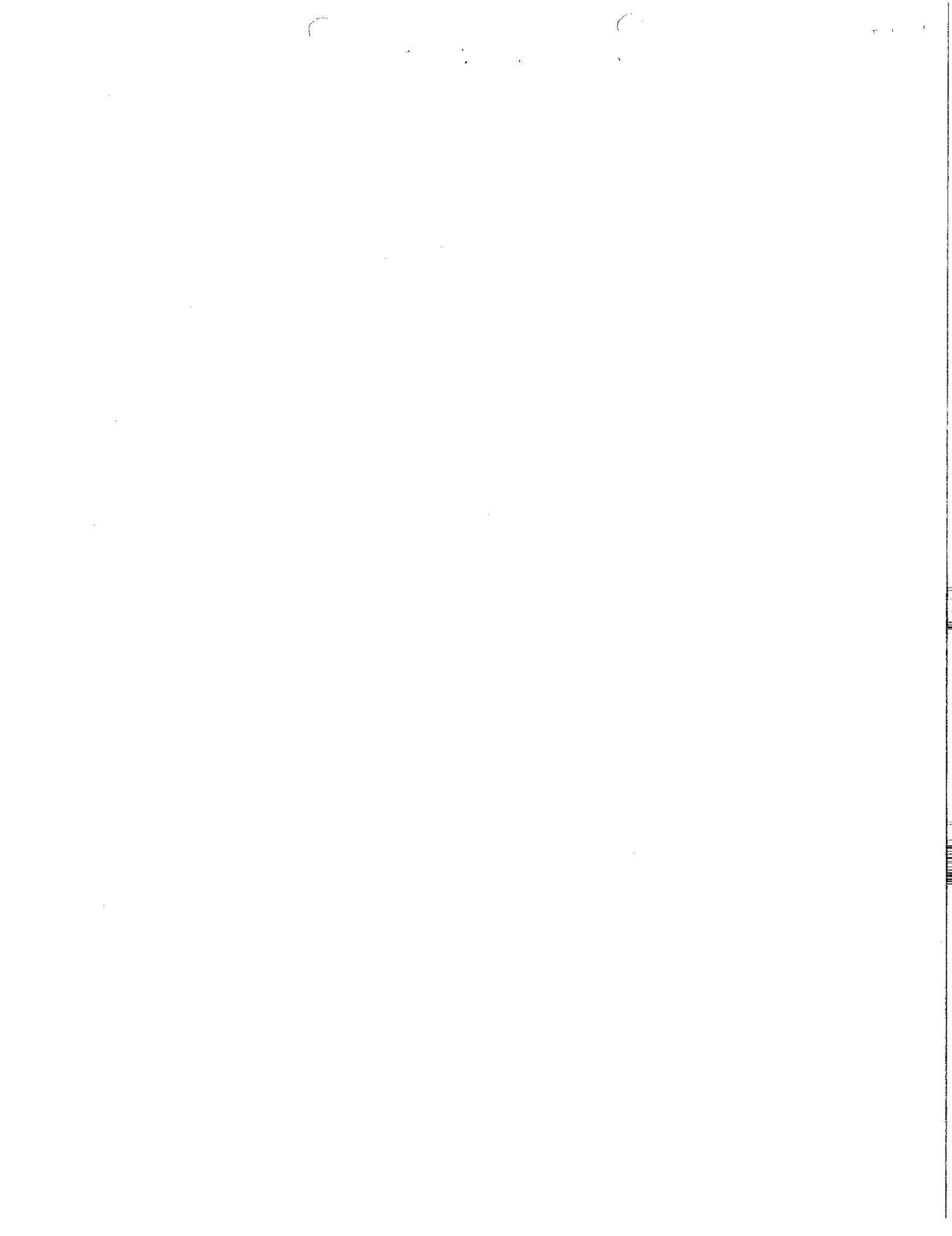
18) To cook a food in a pan without browning over low heat until the item softens and releases moisture.

- a. Sweat
- b. Boil
- c. Roast
- d. Grill

Fill-in the Blank (1 point each)

19) Salt & Pepper are the basic seasoning ingredients for all savory recipes.

20) Chop : to cut into very small pieces when uniformity of size and shape is not important.



C 1) After washing your hands, which item should be used to dry them?

- a) Clean apron
- b) Sanitized wiping cloth
- c) Single use paper towel
- d) Common used cloth

C 2) While washing dishes by hand, which item should you wear?

- a) Cutting glove
- b) Oven Mitt
- c) Rubber glove
- d) Nothing

D 3) When should you wash your hands?

- a) Before you start work
- b) After handling non-food items (garbage, money, cleaning chemicals)
- c) After using the restroom
- d) All of the above

B 4) If you need to move a heavy load, you should PULL and not PUSH the object.

- a) True
- b) False

E 5) Which of the following could you be at risk for getting burned from?

- a) Steam from boiling pots
- b) Hot liquids (coffee, soup, tea)
- c) Hot equipment (ovens, pots, chafing dishes)
- d) Harsh chemicals
- e) All of the above

A 6) All work-related injuries, accidents or illnesses should be reported immediately to the supervisor on duty.

- a) True
- b) False

C 7) What should you do if you spill liquids or see a liquid spill?

- a) Leave it for someone else to clean-up
- b) Wait until the end of your shift to clean it
- c) Flag the spill and clean it immediately
- d) Not sure

C 8) When handling hot items you should?

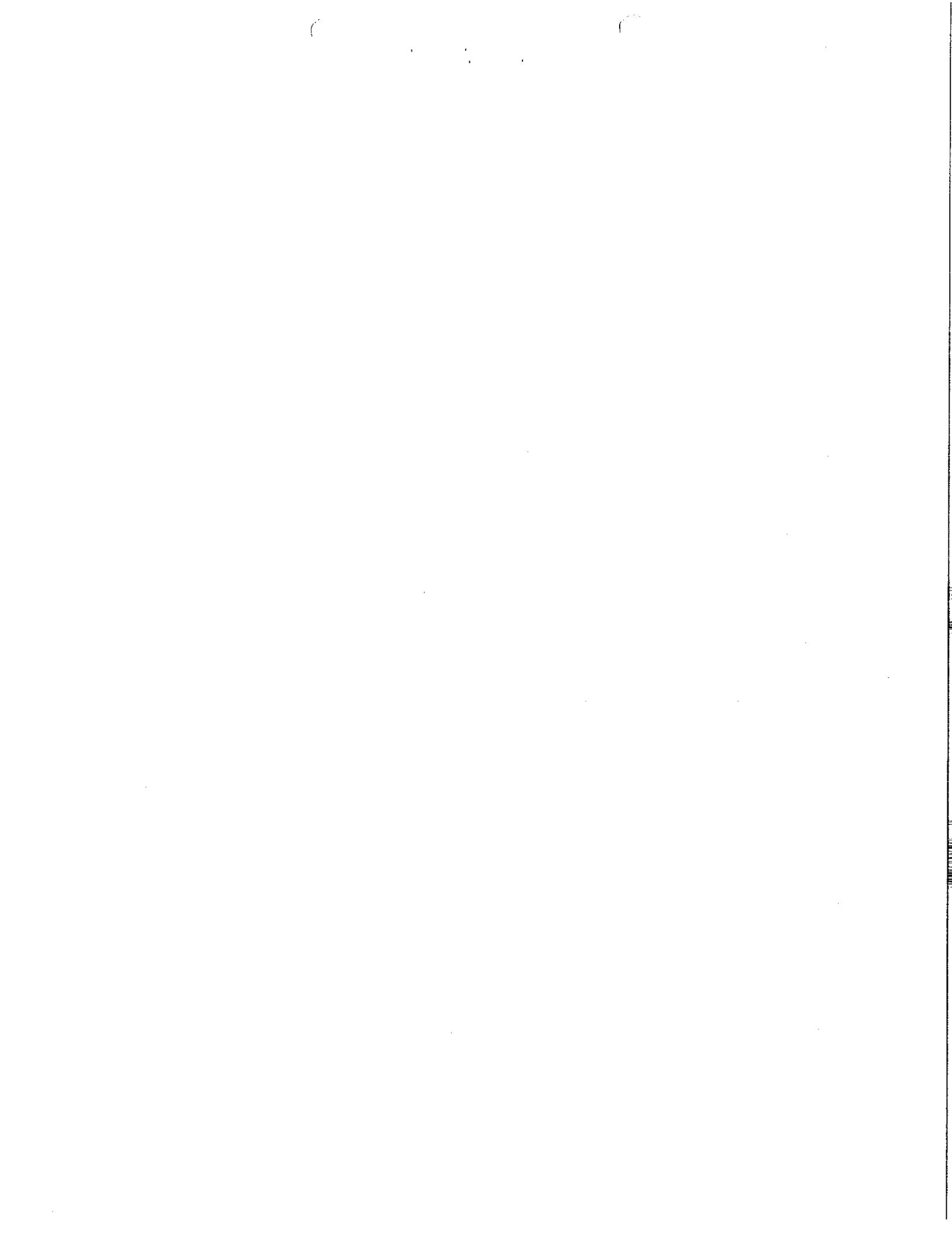
- a) Wear rubber gloves
- b) No need to wear anything
- c) Use an oven mitt or dry cloth towel
- d) Nothing

A 9) If you are using a three-compartment sink for cleaning and sanitizing, the second sink is used for?

- a) Rinsing
- b) Scraping
- c) Washing
- d) Sanitizing

D 10) What is the proper method for cleaning and sanitizing stationary equipment?

- a) Spray with a strong cleaning solution and wipe with a sanitized cloth
- b) Spray with a sanitizing solution, then rinse with clean water and dry
- c) Wash and rinse, then wipe or spray with a chemical-sanitizing solution
- d) Brush off loose soil with a clean cloth, then wipe with a sanitizing solution





Your Hospitality Staffing Professionals

Attendance Policy

The cost of absenteeism and lateness is difficult to estimate, no one can calculate the cost of the burden this puts on others who have to do the absent person's work. Most people will be late or sick at one time or another. But when short-term absences become more frequent, they might signal personal, medical, or job-related problems.

It is your responsibility to notify your supervisor at least 24 hours prior to your shift of any anticipated tardiness or absence. All tardiness or absences should be reported to the Emergency Line at 800.236.2276 x2207. You should provide the general reason for your absence, and understand that excessive absences and lateness will lead to disciplinary action.

Below is a breakdown of how infractions will be measured. Any employee who accumulates more than three points in a 90-day period can result in termination of employment.

Tardy – Anybody not signed/ clocked-in by their start time. 1 Point

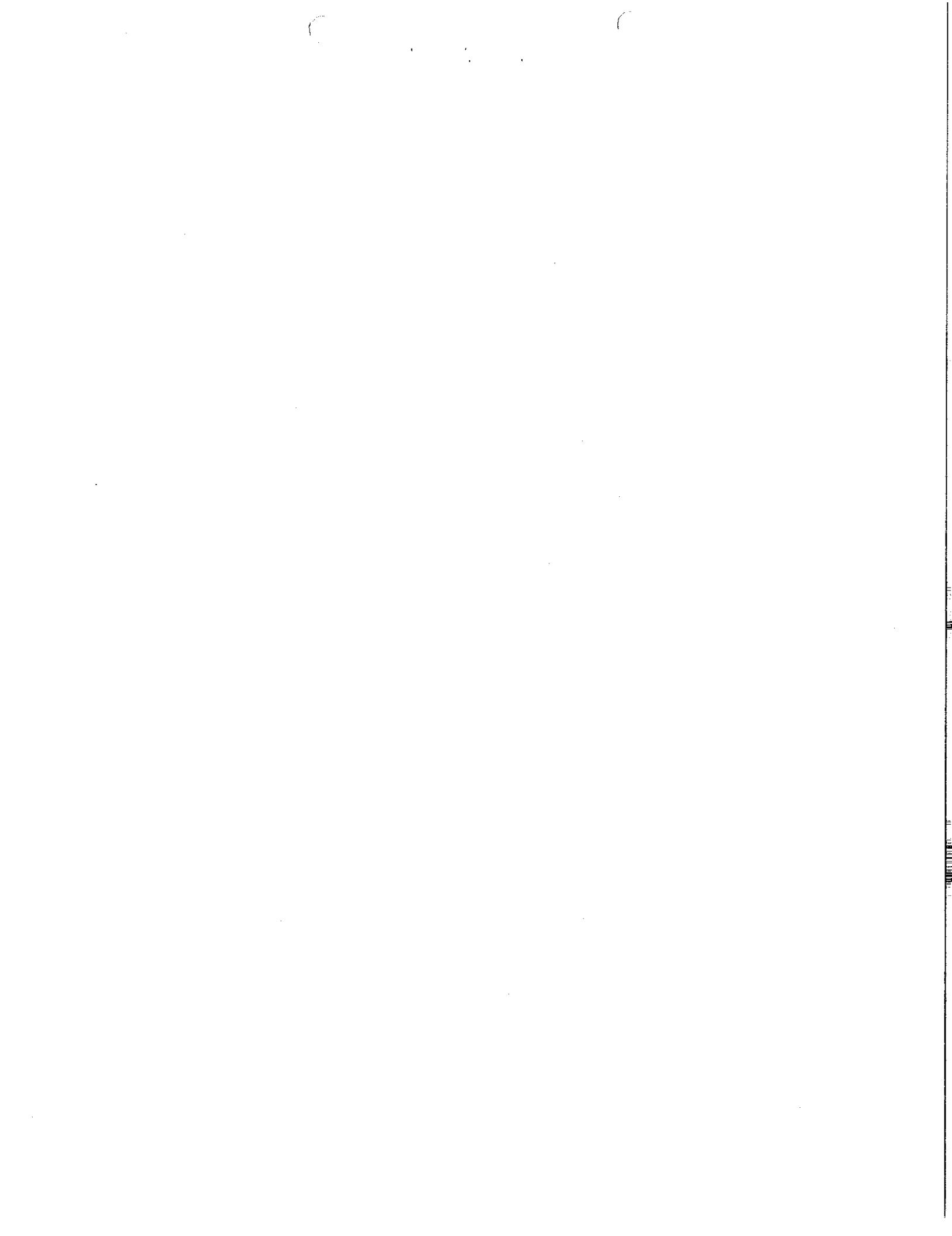
Call Off – Needing to be taken off a shift after schedules are sent out. It is your responsibility to request any desired time off in advance. 1 Point

LM Call-Out – Failing to provide Acrobat with 24-hour notice before missing a shift. 1 Points

No Call No Show – Failing to provide Acrobat with any notice before missing a shift. 3 Points

Name: Sybil Spin Date: 5/3/19

Signature: J





100 Hamilton Ave. | Suite 300 | Palo Alto, CA | 650.815.0200

Hello,

As part of the Palantir Team, we would like you to have many of the same conveniences as our full time employees. This includes having access to our buildings, and technology and electronic communications systems.

In order to streamline your access we will need you to sign the following attached documents:

- Personal Information and Emergency Contact Form
- Non-Disclosure Agreement
- PIIA (Proprietary Information and Inventions Agreement) Form
- Electronic Communication and Devices Privacy Policy
- Visitor Liability Release
- We will also need a copy of your driver's license and social security card to confirm work authorization

Due to the sensitive nature of our work, we request that you follow certain guidelines while you are in the work space. Although we all enjoy a good bit of fun, maintaining a certain level of professionalism is expected. Please be discreet about things you may see or hear in and around the office. You will be trusted with access to our networks and electronic resources and we expect that you will use them appropriately.

If you have any questions, please contact People Operations at paperwork@palantir.com.

Sincerely,

People Operations

Q Palantir

For your safety and well-being, we are collecting your personal contact information. This information will be used to provide notification to your personal contacts ONLY in the event of an emergency.

Thank you!

| Contracting Agency Info | |
|---------------------------|--|
| Name of Company/Employer | |
| Name of Contact at Agency | |
| Sponsor/Palantir Contact | |

| Personal Contact Information | |
|--|----------------------|
| Your Name | Jayne Cpn |
| Phone | (708) 706-3596 |
| Phone - SMS capable? <input checked="" type="checkbox"/> | Y/N |
| Your Email Address | Siwm1@gmail.com |
| Street Address | 1445 Golden Lake Rd. |
| City | San Jose |
| State/Province | CA |
| Zip/Postal Code | 95131 |
| Country | USA |

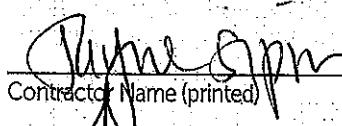
| Emergency Contact Information | |
|--|--------------------------|
| Emergency Contact Name | Mary June Jitando-Nguyen |
| Phone | (708) 209-4306 |
| Phone - SMS capable? <input checked="" type="checkbox"/> | Y/N |
| Email Address | |
| Street Address | 1891 Silk Wool Ln |
| City | San Jose |
| State/Province | CA |
| Zip/Postal Code | 95131 |
| Country | USA |

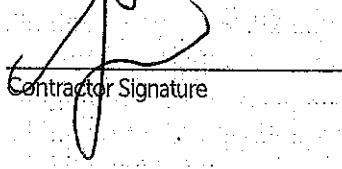


Non-Disclosure of Trade Secrets

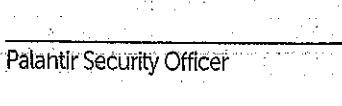
In consideration of my being engaged as a contractor by Palantir Technologies, I the undersigned hereby agree and acknowledge the following:

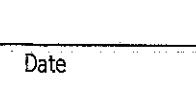
1. That during my contracting engagement there may be disclosed to me certain trade secrets consisting of:
 - a) Technical information: methods, processes, formulae, compositions, systems, techniques, inventions, machines, computer programs and research projects.
 - b) Business information: customer lists, pricing data, sources of supply, and marketing, production, or merchandising systems or plans.
2. I agree that during and after the termination of my contracting engagement, I shall not use for myself or others, or disclose or divulge to others any trade secrets, confidential information, or any other data of the Company in violation of this agreement.
3. Upon terminating my contracting engagement with the Company:
 - a) I shall return to the Company all documents and property pertaining to the Company, including but not limited to: drawings, blueprints, records, reports, manuals, correspondence, customer lists, computer programs, inventions, and all other materials and all copies thereof relating in any way to the Company's business and in any way obtained by me during my contracting engagement I further agree that I shall not retain any copies or reproductions of the foregoing.
 - b) The Company may notify any future or prospective employer of this agreement.
 - c) This agreement shall be binding upon me and my personal representatives and successors in interest, and shall inure to the benefit of the Company, its successors and assigns.
 - d) The enforceability of any one provision to this agreement shall not impair or affect any other terms of this agreement.
 - e) In the event of any breach of this agreement, the Company shall have full rights to injunctive relief, in addition to any other existing rights, without requirement of posting bond, if permitted by law.


Contractor Name (printed)


Contractor Signature

5/3/18
Date


Palantir Security Officer


Date

PROPRIETARY INFORMATION AND INVENTIONS AGREEMENT

The following confirms and memorializes an agreement (this "Agreement") that Palantir Technologies Inc., a Delaware corporation (the "Company"), and John Dorn have had since the commencement of my contracting engagement with the Company in any capacity (the "Effective Date") and that is and has been a material part of the consideration for my contracting engagement by Company:

1. I have not entered into, and I agree I will not enter into, any agreement either written or oral in conflict with this Agreement or my contracting engagement with Company. I will not violate any agreement with or rights of any third party or, except as expressly authorized by Company in writing hereafter, use or disclose my own or any third party's confidential information or intellectual property when acting within the scope of my contracting engagement or otherwise on behalf of Company. Further, I have not retained anything containing any confidential information of a prior employer or other third party, whether or not created by me.
2. Company shall own all right, title and interest (including patent rights, copyrights, trade secret rights, mask work rights, *sui generis* database rights and all other intellectual and industrial property rights of any sort throughout the world) relating to any and all inventions (whether or not patentable), works of authorship, mask works, designs, know-how, ideas and information made or conceived or reduced to practice, in whole or in part, by me during the term of my contracting engagement with Company, to the fullest extent allowed by applicable law (collectively "Inventions"). I will promptly disclose all Inventions to Company and, to the extent allowed by applicable law, I will also disclose anything I believe is excluded so the Company can make an independent assessment. I hereby make all assignments necessary to accomplish the foregoing. I shall further assist Company, at Company's expense, to further evidence, record and perfect such assignments, and to perfect, obtain, maintain, enforce, and defend any rights specified to be so owned or assigned. I hereby irrevocably designate and appoint Company as my agent and attorney-in-fact, coupled with an interest and with full power of substitution, to act for and in my behalf to execute and file any document and to do all other lawfully permitted acts to further the purposes of the foregoing with the same legal force and effect as if executed by me. If I wish to clarify that something created by me prior to my contracting engagement that relates to Company's actual or proposed business is not within the scope of the foregoing assignment, I have listed it on Appendix A in a manner that does not violate any third party rights. Without limiting Section 1 or Company's other rights and remedies, if, when acting within the scope of my contracting engagement or otherwise on behalf of Company, I use or (except pursuant to this Section 2) disclose my own or any third party's confidential information or intellectual property (or if any Invention cannot be fully made, used, reproduced, distributed and otherwise exploited without using or

violating the foregoing), Company will have and I hereby grant Company a perpetual, irrevocable, worldwide royalty-free, non-exclusive, sublicensable right and license to exploit and exercise all such confidential information and intellectual property rights.

3. To the extent allowed by law, paragraph 2 includes all rights of paternity, integrity, disclosure and withdrawal and any other rights that may be known as or referred to as "moral rights," "artist's rights," "droit moral," or the like (collectively "Moral Rights"). To the extent I retain any such Moral Rights under applicable law, I hereby ratify and consent to any action that may be taken with respect to such Moral Rights by or authorized by Company and agree not to assert any Moral Rights with respect thereto. I will confirm any such ratifications, consents and agreements from time to time as requested by Company.

4. I agree that all Inventions and all other business, technical and financial information (including, without limitation, the identity of and information relating to customers or employees) I develop, learn or obtain during the term of my contracting engagement that relate to Company or the business or demonstrably anticipated business of Company or that are received by or for Company in confidence, constitute "Proprietary Information." I will hold in confidence and not disclose or, except within the scope of my contracting engagement, use any Proprietary Information. However, I shall not be obligated under this paragraph with respect to information I can document is or becomes readily publicly available without restriction through no fault of mine. Upon termination of my contracting engagement, I will promptly return to Company all items containing or embodying Proprietary Information (including all copies), except that I may keep my personal copies of (i) my compensation records, (ii) materials received solely in my capacity as a shareholder or optionholder of the Company (if then applicable), and (iii) this Agreement. I also recognize and agree that I have no expectation of privacy with respect to Company's telecommunications, networking or information processing systems (including, without limitation, stored computer files, email messages and voice messages) and that my activity and any files or messages on or using any of those systems may be monitored at any time without notice.

5. I agree that during the course of my contracting engagement with Company (whether or not during business hours), I will not, in the same or materially similar capacity as I worked for the Company, without the prior written consent of the Company, whether paid or not: (i) serve as a partner, principal, licensor, licensee, employee, consultant, officer, director, manager, agent, affiliate, representative, advisor, promoter, associate, investor, or otherwise for, (ii) directly or indirectly, own, purchase, organize or take preparatory steps for the organization of, or (iii) build, design, finance, acquire, lease, operate, manage, control, invest in, work or consult for or otherwise join, participate in or affiliate myself with, any business whose business, products or operations are in any respect competitive with the Company's business. Should I obtain another contracting engagement or employment during my contracting engagement with the Company, I agree to

provide written notification to the Company as to the name and address of my new employer, the position that I expect to hold, and a general description of my duties and responsibilities, at least three (3) business days prior to starting such contracting engagement or employment.

6. To the extent allowed by applicable law, I agree that from the Effective Date until twelve (12) months immediately following the termination of my relationship with the Company, whether I resign voluntarily or am terminated by the Company involuntarily, I will not directly or indirectly solicit, or recruit, or attempt to solicit, or recruit, any employee of the Company to leave their employment with the Company, nor will I contact any employee of the Company, or cause an employee of the Company to be contacted, for the purpose of leaving employment with the Company. In the event of my breach or violation of this Section 6, or good faith allegation by the Company of my breach or violation of this Section 6, the restricted periods set forth in this Section 6 shall be tolled until such breach or violation, or dispute related to an allegation by the Company that I have breached or violated this Section 6, has been duly cured or resolved, as applicable.

7. I agree that this Agreement is not a contracting contract for any particular term and that I have the right to resign and Company has the right to terminate my contracting engagement at will, at any time, for any or no reason, with or without cause. In addition, this Agreement does not purport to set forth all of the terms and conditions of my contracting engagement, and, as a contractor of Company, I have obligations to Company which are not set forth in this Agreement. However, the terms of this Agreement govern over any inconsistent terms and can only be changed by a subsequent written agreement signed by the CEO of Company.

8. I agree that my obligations under paragraphs 2, 3, 4, 5 and 6 of this Agreement shall continue in effect after termination of my contracting engagement, regardless of the reason or reasons for termination, and whether such termination is voluntary or involuntary on my part, and that Company is entitled to communicate my obligations under this Agreement to any future employer or potential employer of mine. My obligations under paragraphs 2, 3 and 4 also shall be binding upon my heirs, executors, assigns, and administrators and shall inure to the benefit of Company, its subsidiaries, successors and assigns.

9. Any dispute in the meaning, effect or validity of this Agreement shall be resolved in accordance with the laws of the State of Delaware of the United States of America without regard to the conflict of laws provisions thereof. I further agree that if one or more provisions of this Agreement are held to be illegal or unenforceable under applicable Delaware law, such illegal or unenforceable portion(s) shall be limited or excluded from this Agreement to the minimum extent required so that this Agreement shall otherwise remain in full force and effect and enforceable in accordance with its terms. This Agreement is fully assignable and transferable by Company, but any purported assignment or transfer by me is void. I

also understand that any breach of this Agreement will cause irreparable harm to Company for which damages would not be an adequate remedy, and, therefore, Company will be entitled to injunctive relief with respect thereto in addition to any other remedies and without any requirement to post bond. I acknowledge and agree that to the extent permitted under Delaware law, I shall indemnify the Company from any and all costs, fees, or expenses incurred by the Company (including, but not limited to, attorneys' fees) in successfully enforcing the terms of this Agreement against me (including, but not limited to, a court temporarily, partially, or fully granting any application, motion, or petition by the Company for injunctive relief) as a result of my breach or threatened breach of any provision contained herein.

10. This Agreement constitutes the entire agreement and understanding with respect to the subject matter herein and supersedes all prior written and oral agreements, discussions or representations between the parties regarding such subject matter. This Agreement may be executed in counterparts and by facsimile, and each counterpart and facsimile shall have the same force and effect as an original and shall constitute an effective, binding agreement on the part of each of the undersigned.

[Remainder of Page Intentionally Left Blank]

I HAVE READ THIS AGREEMENT CAREFULLY AND I UNDERSTAND AND ACCEPT THE OBLIGATIONS WHICH IT IMPOSES UPON ME WITHOUT RESERVATION. NO PROMISES OR REPRESENTATIONS HAVE BEEN MADE TO ME TO INDUCE ME TO SIGN THIS AGREEMENT, WHICH I SIGN VOLUNTARILY AND FREELY.

5/3/18
Date

Consultant/Contractor

Signature

Jayne Oph
Name (Printed)

Accepted and Agreed to:

Palantir Technologies Inc.

By: _____

Name: _____

APPENDIX A

PRIOR MATTER



100 Hamilton Ave. | Suite 300 | Palo Alto, CA | 650.815.0200

Personal Property Privacy Policy

Guest's personal property such as handbags, lunch containers, briefcases, and automobiles parked on Company property, are all subject to inspection by the Company with or without prior notice. You should not bring personal items onto Company property if you wish to keep the items private.

Electronic and Physical Monitoring

All employees and guests should be aware that there are Company systems in place that are capable of monitoring and recording all network traffic to and from any computer, phone or remote access devices that employees or guests may use while on Company networks. The Company reserves the right to access, review, copy, and delete any of the information, data, or messages accessed through these systems with or without notice to the employee or guest and/or in the employee's or guest's absence. This includes, but is not limited to, all e-mail messages sent or received, all instant messenger messages sent or received, all website visits, all chat sessions, all news group activity (including groups visited, messages read, and postings), and all file transfers into and out of the Company's networks. The Company further reserves the right to retrieve previously deleted messages from e-mail or voicemail and monitor usage of the Internet, including websites visited and any information employees or guests have downloaded using Company networks. In addition, the Company may review Internet and Company Information System activity and analyze usage patterns. Accordingly, no employee or guest should have any expectation of privacy as to his or her Internet or information systems usage on Company networks and should not use these systems for information they wish to keep private.

All employees and guests should also be aware that the Company reserves the right to inspect any and all files stored in all areas of the Company's network, including those assigned to individuals, and those stored on any Company network, computer, remote access device, mobile device, or other to assure compliance with this and other Company policies.

I have read this agreement carefully and I understand and accept the obligations which it imposes upon me without reservation.

By:

Date:



VISITOR AGREEMENT

PARTICIPATION IN RECREATIONAL ACTIVITIES, ASSUMPTION OF RISK AND RELEASE FROM LIABILITY

1. Voluntary Participation

I, John Smith acknowledge that I have been invited by Palantir Technologies Inc. ("Palantir") or an employee of Palantir to participate in certain recreational activities on the premises of Palantir and/or off site locations, possibly including but not limited to use of on-site scooters and other toys, use of the on-site fitness center, or off-site sporting events or group recreational trips (together, the "Recreational Activities"). I further acknowledge that I have voluntarily requested that Palantir permit me to participate in the Recreational Activities. In consideration for such permission, I agree to enter into this Agreement For Participation In Recreational Activities, Assumption Of Risk And Release From Liability.

2. Physical Condition

I acknowledge that it is my sole responsibility to consult with my personal health care provider regarding any medical condition that might prevent or limit my participation in the Recreational Activities. I further understand and agree that I am solely responsible for abiding by my personal health care provider's recommendations as to any medical restrictions on my participation in the Recreational Activities.

3. Rules Regarding Recreational Activities

I understand and acknowledge that before I participate in the Recreational Activities it is my responsibility to become fully acquainted with the safety rules. I understand and agree to comply with all rules Palantir adopts or has adopted governing participation in the Recreational Activities. I further understand and agree that if I violate any such rules, Palantir may immediately terminate my participation in the Recreational Activities. I also understand that Palantir may at any time at its sole discretion temporarily or permanently cease to permit any participation in the Recreational Activities.

4. Assumption of Risk

I AM AWARE THAT THERE ARE RISKS AND HAZARDS ASSOCIATED WITH PARTICIPATION IN THE RECREATIONAL ACTIVITIES. I AM FURTHER AWARE THAT I WILL BE PARTICIPATING IN THE RECREATIONAL ACTIVITIES WITH OTHER PERMITTEES OF PALANTIR, INCLUDING WITH EMPLOYEES, AND THAT IT IS POSSIBLE FOR MY PERSON OR PROPERTY TO BE HARMED EITHER AS A RESULT OF MY OWN ACTIVITY OR AS A RESULT OF ACTIVITY BY SUCH OTHER PERMITTEES OR SIMPLY BY BEING PRESENT WHERE OTHERS ARE PARTICIPATING IN THE RECREATIONAL ACTIVITIES, WITH OR WITHOUT PERMISSION, AND THAT PALANTIR HAS NOT AGREED TO SUPERVISE ANY OF THESE ACTIVITIES.

I VOLUNTARILY ASSUME ALL RISK OF LOSS, DAMAGE OR INJURY TO PERSON OR PROPERTY WHICH MAY ARISE FROM OR IS RELATED TO MY PARTICIPATION IN THE RECREATIONAL ACTIVITIES, WHETHER SUCH RISK IS KNOWN OR UNKNOWN TO ME.

5. Release

In consideration of my being allowed to participate in the Recreational Activities, I do hereby waive, release and forever discharge Palantir and its officers, partners, directors, agents, employees, representatives, executors, and all others in privity with same, whether named herein or not (the "Releasees"), from all direct, indirect and consequential damages and from any and all claims, demands, liabilities, or causes of action of any kind or character whatsoever, and howsoever caused, resulting from my participation in the Recreational Activities on behalf of myself, my agents, assignees, executors, guardians, family, heirs, and legal representatives. This release expressly includes injury or damages resulting from my own acts or omissions, the acts or omissions of any other participant in the Recreational Activities or from any acts or omissions of the Releasees in any way related, directly or indirectly, to my participation in the Recreational Activities. I agree to inform my family members of this release and ensure they understand the ramifications.

6. Indemnification

I hereby agree to defend and to forever indemnify and hold harmless the Releasees from all actions, claims or demands which may be asserted against the Releasees by any person or legal entity as a result of or in any way connected to my participation in the Recreational Activities. It is expressly understood that this indemnification applies even if the parties to be indemnified were negligent, grossly negligent, strictly liable for placing a defective product into the stream of commerce or for any other reason, liable for breach of warranty or contractual breaches, liable under the California Consumer Protection Act, liable for breach of other legal duties, liable for violation of any other law, regulation, or ordinance, or liable in any other manner. This indemnification will include, but is not limited to, the amount of any claims and the costs of defending them, including attorney's fees and court costs.

7. Knowing and Voluntary Execution

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I VOLUNTARILY AND OF MY OWN FREE WILL SIGN THIS AGREEMENT FOR PARTICIPATION IN RECREATIONAL ACTIVITIES, ASSUMPTION OF RISK AND RELEASE FROM LIABILITY.

Dated: 5/3/19

Signature

Print Name