ACROBAT OUTSOURCING
TSC GROUP

Connie Rose Kiep

Taborca ID: __54025__

Date of Hire: __10 / 14 / 2019__

Date of _Re-Act_: ____ / ____ / ____

- ☑ E-verify
- ☑ Hire Right EE
- ☑ Hire Right Internal (upload any list A docs)
- ☑ Notice to Employee Completed
- ☑ Added to Orientation Time Sheet
- ☑ Background Check

- ☑ New Hire List (All fields)
- ☑ Check Taborca Profile (All fields)
- ☑ Upload Resume and Skills Tests (one doc)
- ☐ Upload Food Handler's Card
    - ☐ Presented
    - ☐ Emailed

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
- ☐ 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
- ☐ 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 it's been over a year since last shift
- ☐ Delete employee from the INA/TER spreadsheet if they are on it
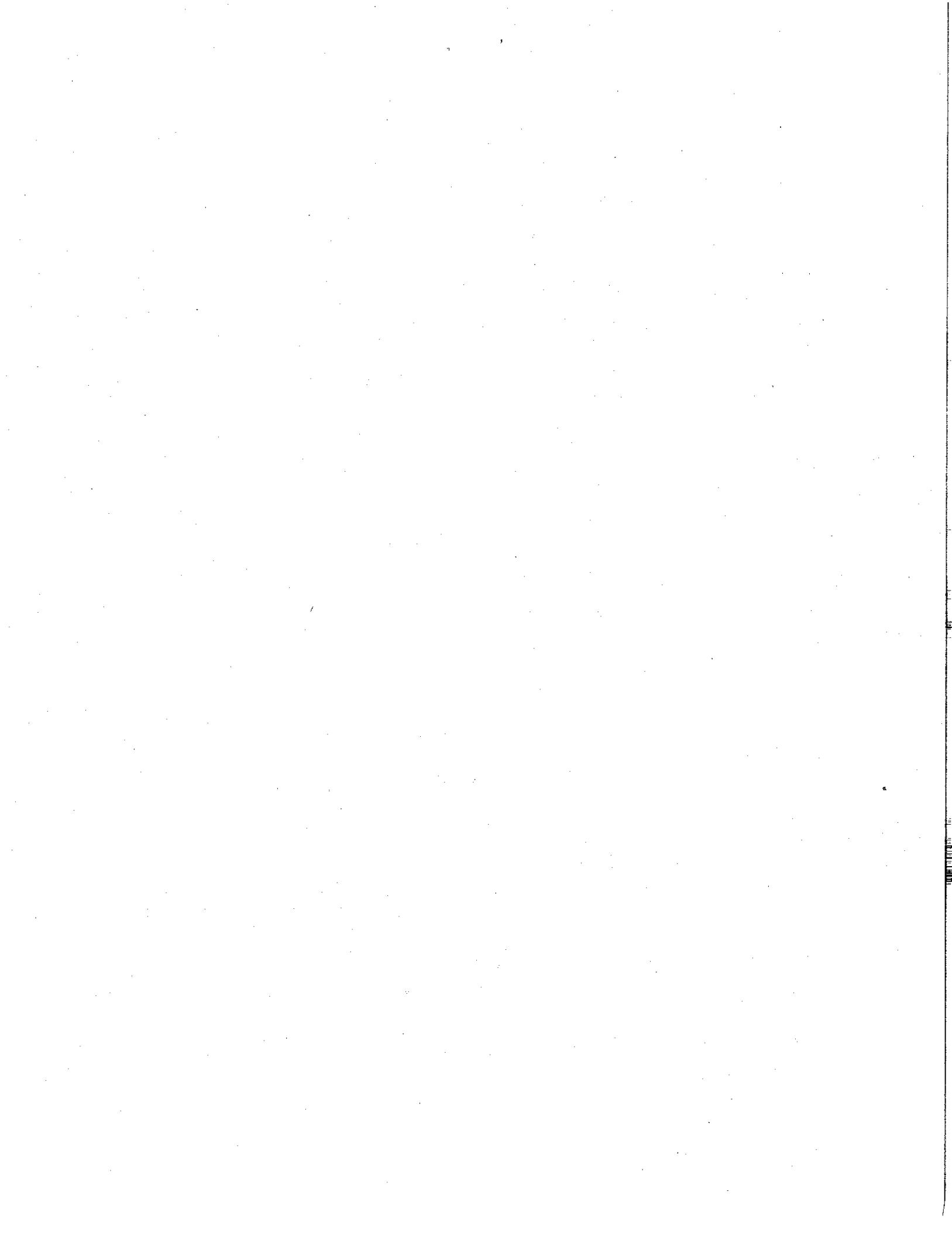
Interview Note Sheet
General

Name: Connie Rose Kiep	Interviewer: Ngoc Ho
Date: 10/14/2019	Rate of Pay: $19/hr
Position(s) Applied for: Cashier/Concessions	Referred by: CL

Test Scores / **Seeking**

Position	Score	%	Position	Score	%
Server	/35	%	Bartender	/30	%
Prep Cook	/15	%	Barista	/10	%
Grill Cook	/40	%	Cashier	/10	%
Dishwasher	/10	%	Housekeeping	/16	%

Seeking:
(Full-Time)
(Part-Time)
on-call

Relevant Experience & Summary of Strengths

Total of __1 yrs__ Experience in Food Service/Hospitality

Describe a time when you had to multitask, or work under pressure?	How would you handle a disagreement/argument with a coworker?	What do you do to go above and beyond and exceed your customer's expectations?	Notes:
-Walmart, Black Friday, challenged and prepared for real-life scenarios	-deal and communicate, don't mix personal issues w/ work	-learn responsibility, go out of way to help, keep great attitude	

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

Transportation

Public Transit

Regions Available to work

South Bay

Certifications (if any)

N/A

Availability

-Open weekends
-can make arrangements

Uniforms Owned

___ Bistro White	___ Chef Coat
___ Black Bistro	___ Chef Pants
___ Tuxedo	✓ Knives
___ 1/2 Tuxedo	✓ Black Pants
___ Black Vest	✓ Non-Slip Shoes
___ Long Black Tie	___ Bow Tie
Other:	

Recommendations

___ Acrobat Academy

___ Lead Academy

Other Languages Spoken

N/A
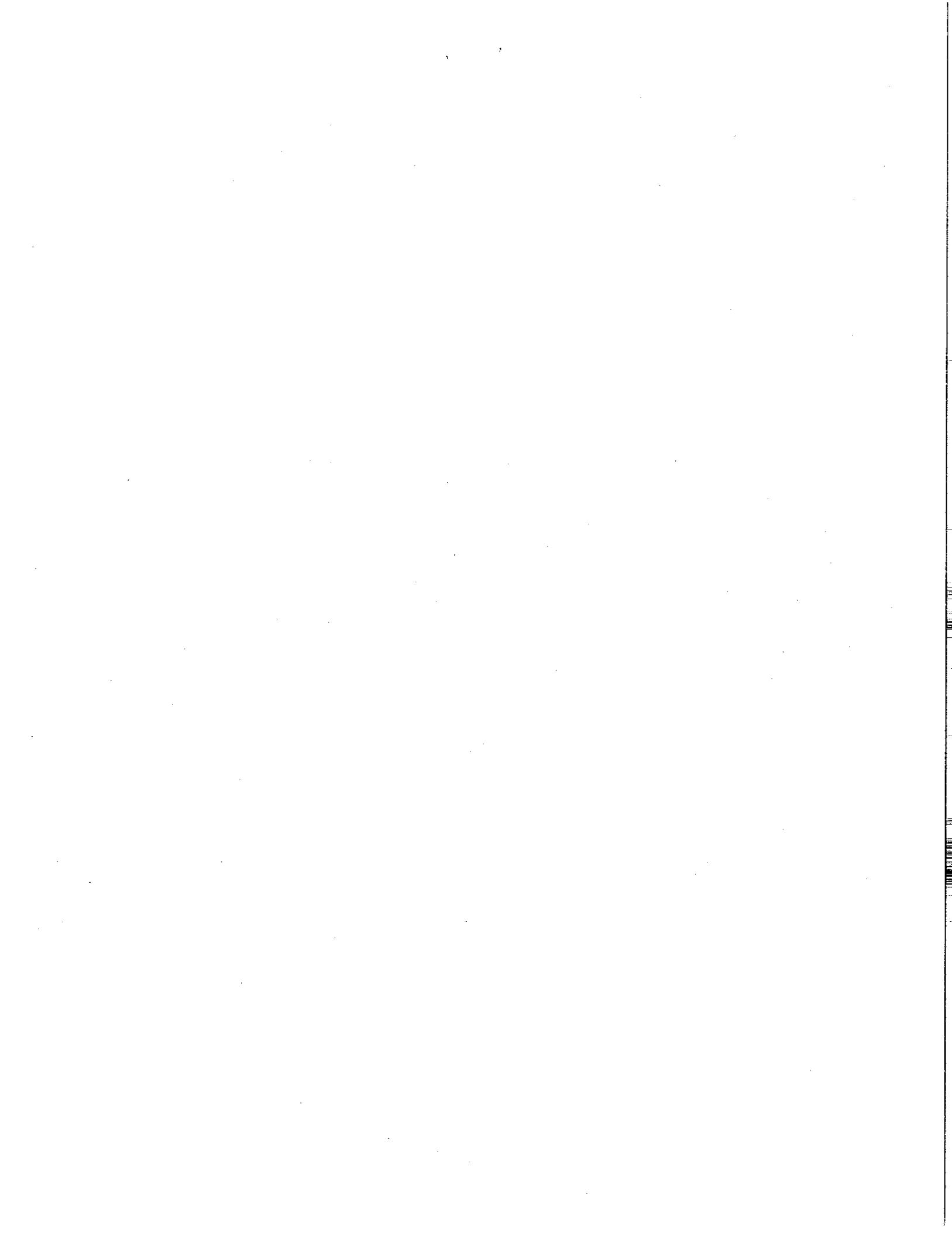
Employment Application San Jose

ACROBAT OUTSOURCING
TSC GROUP

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.

Your Contact Information

First Name	connie rose
Last Name	kiep
E-mail Address	conniekiep@gmail.com
Phone	8088538806
Address	3485 East Hills Dr
Unit or Number	0
City, State	San Jose
Zip Code	95127
What region(s) are you applying to work within?	San Jose
Which position(s) are you applying for?	cashier/concession stand
Are you applying for:	Part-Time
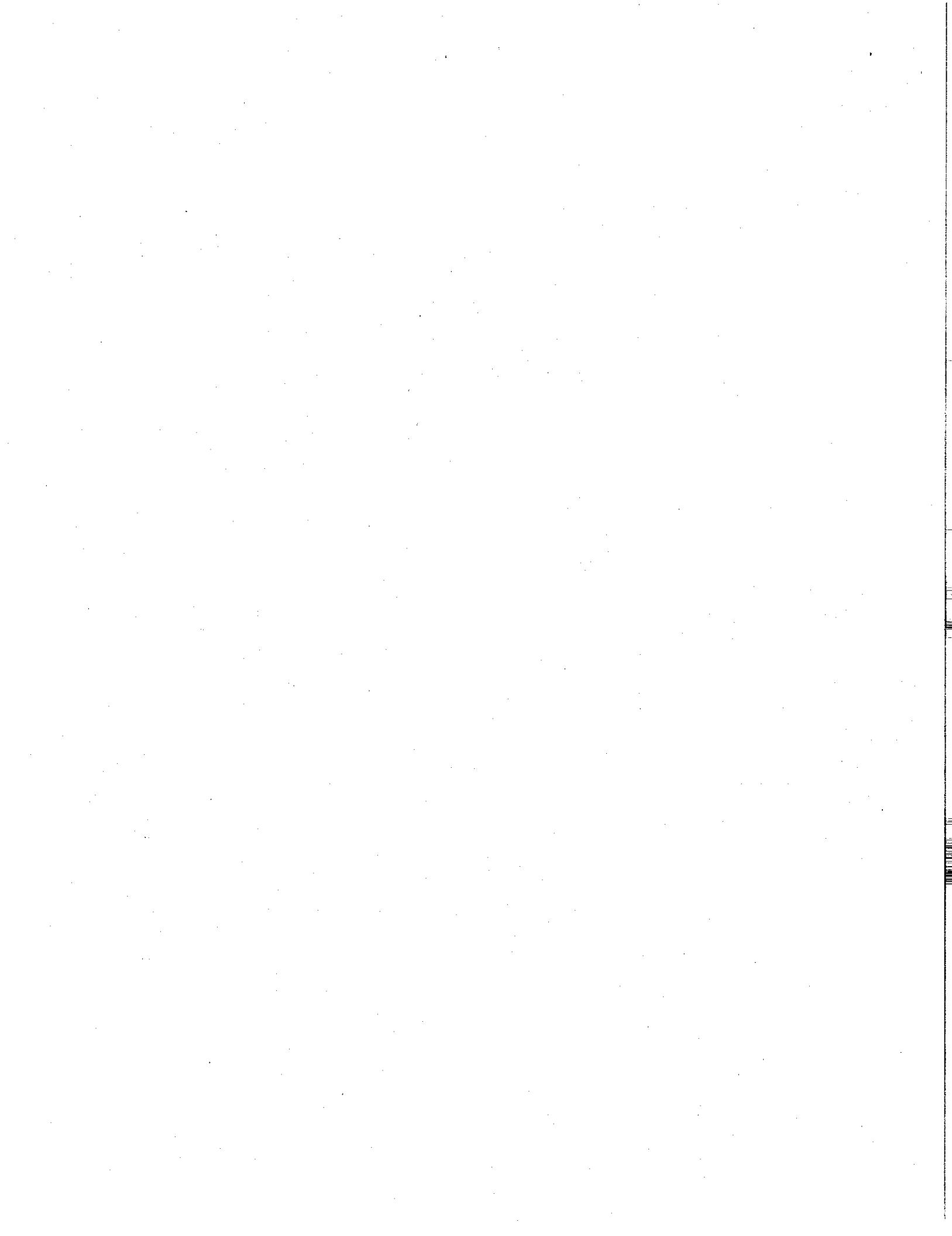
When can you start?   Wednesday, October 9, 2019

Can you work overtime?   Yes

How did you hear about us?   Craigslist

What days/times can you work?
Select all that apply:

Friday PM	Saturday AM	Saturday PM
Sunday AM	Sunday PM	

Do you have any planned vacations or extended leave in the next 12 months? (If no, leave blank)
yes december 19-jan 15

Have you ever applied to or worked for Acrobat before?   No

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

If hired, can you present evidence of your legal right to live and work in this country?   Yes

State age if under 18. If you are under 18, hire is subject to verification that you are of minimum age to work.   21

Are you able to perform the essential functions of the job for which you are applying?   Yes

Education & Skills

Please Indicate Highest Level Achieved
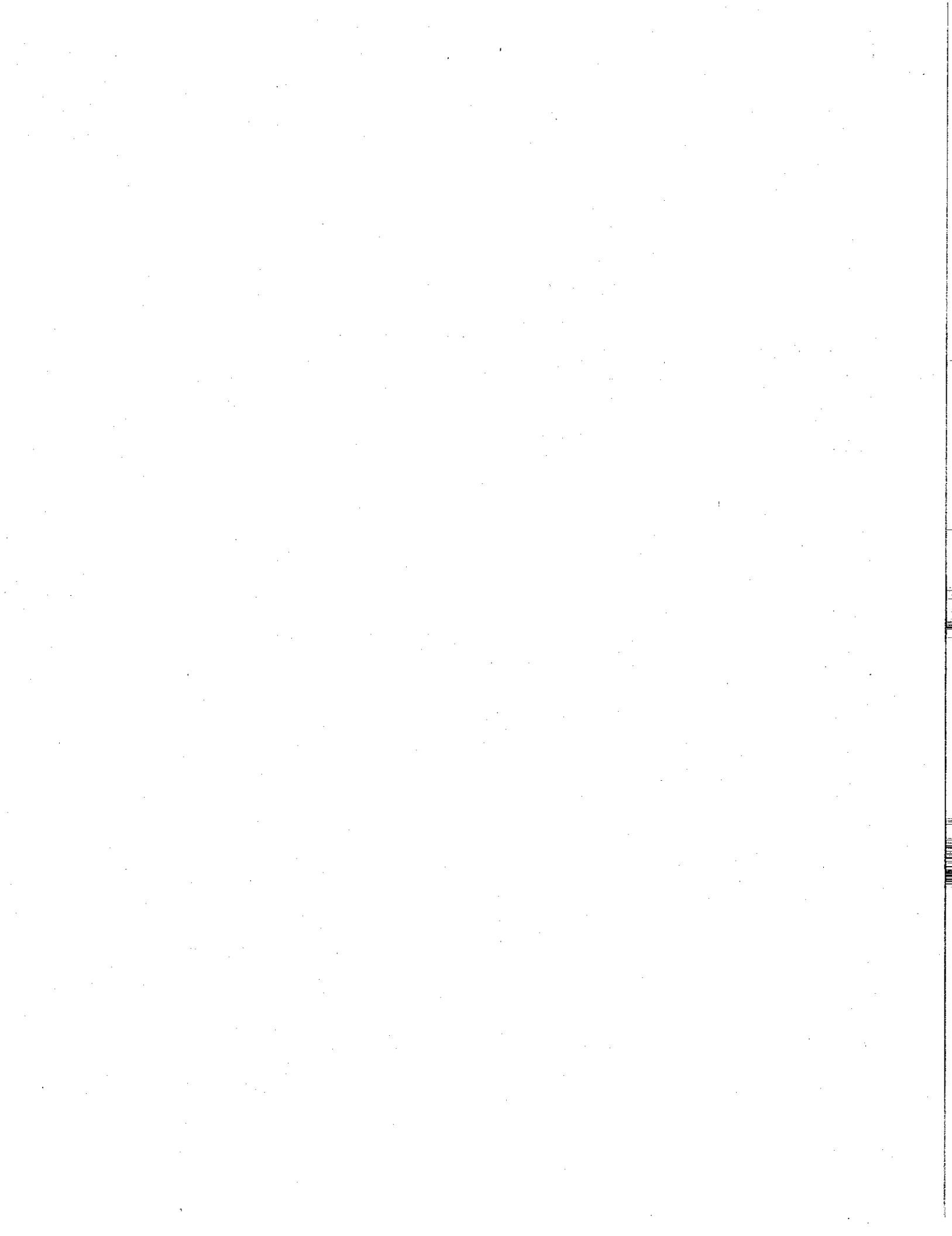
Name of School

Mindszenty High School

City & State

Koror, Palau

Grade/Degree

High School Diploma

Graduated?	Yes
Do you have any special licenses? (If so, label under "Special")	Yes
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")	Yes
Do you have any experience, training, qualifications or special skills? (If so, label under "Special")	Yes

Special:

CPR/BLS certified

Proficient in computer skills (Microsoft applications, Internet use, Software Programs)

Familiar with point of sale system from previous work as a cashier at the Walmart Supercenter.

Employment History

Are you currently employed?	No
Can we contact your current employer?	No

Most Recent Employers
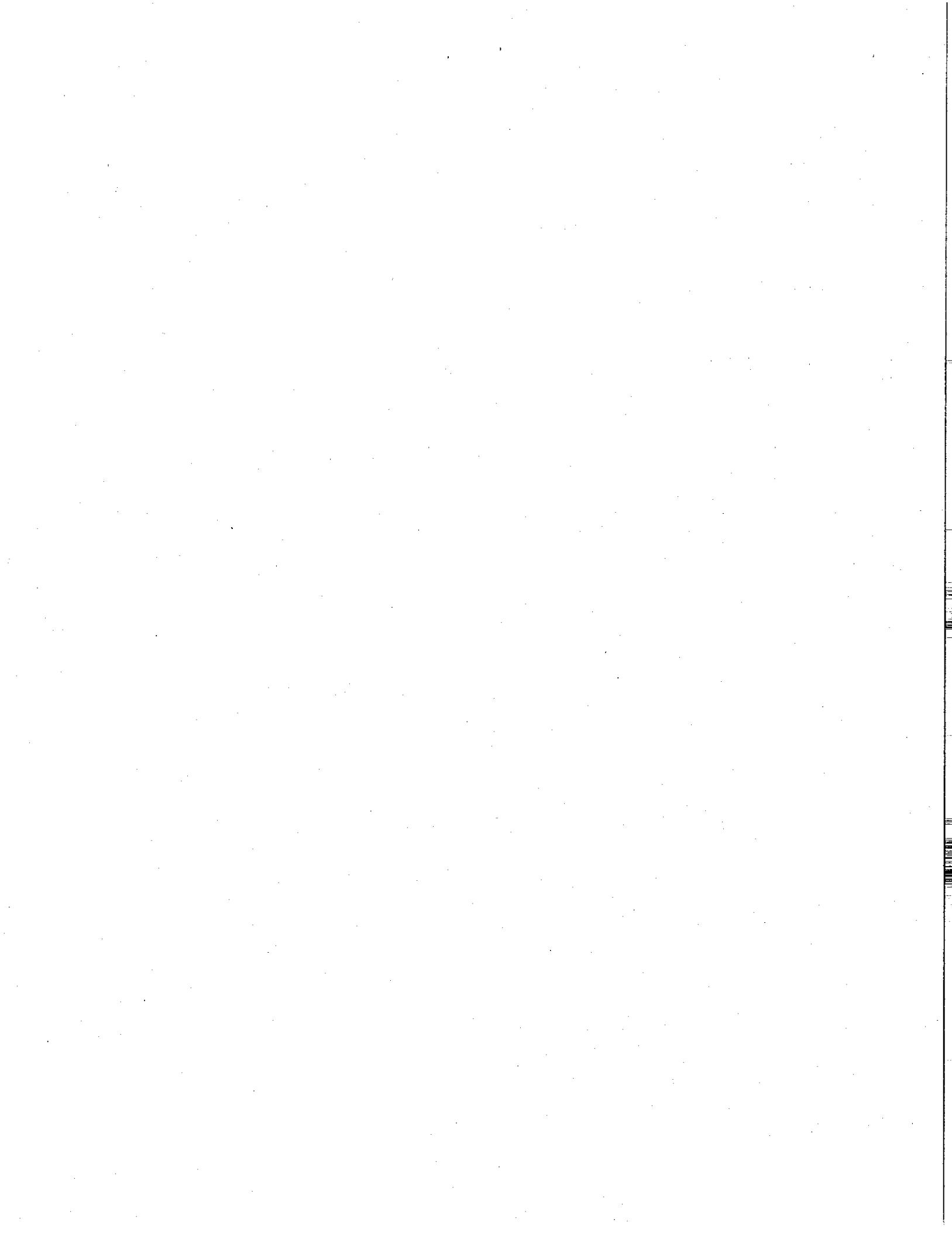
Name and Address of Employer

Walmart Supercenter
777 Story Rd. San Jose, CA

Type of Business

Store

Phone Number

8007755944

Your Position & Duties

Cashier and Customer Service Associate

Date of Employment (from/to):

06/2019 - 10/2019

Reason for Leaving

Conflict with school schedule

Still Employed:

No

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

no

Military Service
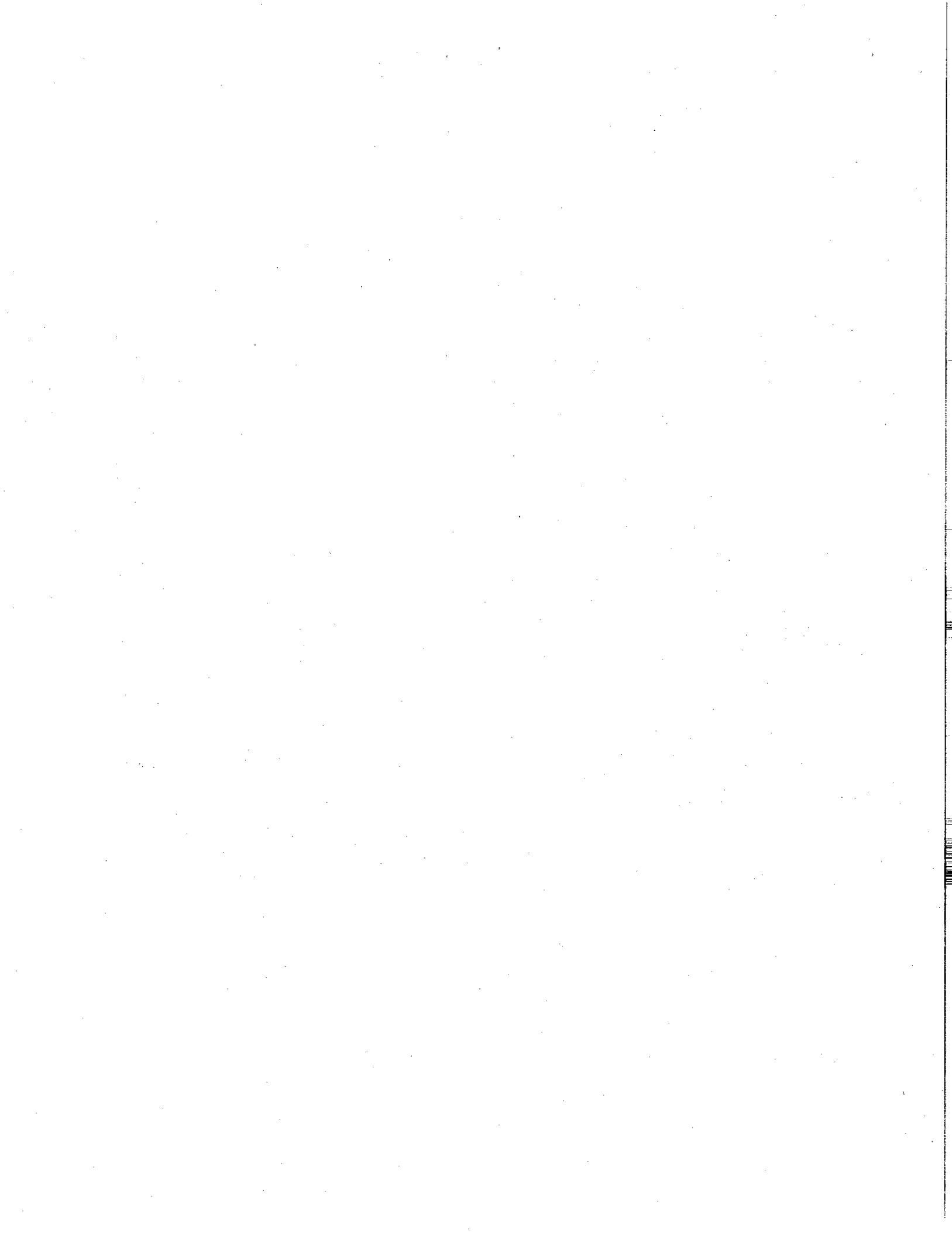
Job Related References

References

First Name	Clivia
Last Name	Masami
E-mail Address	cmasami@gmail.com
Phone	6804881487
Relationship:	Supervisor
Years Acquainted:	2

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the

(Checked box indicates acknowledgemen t)

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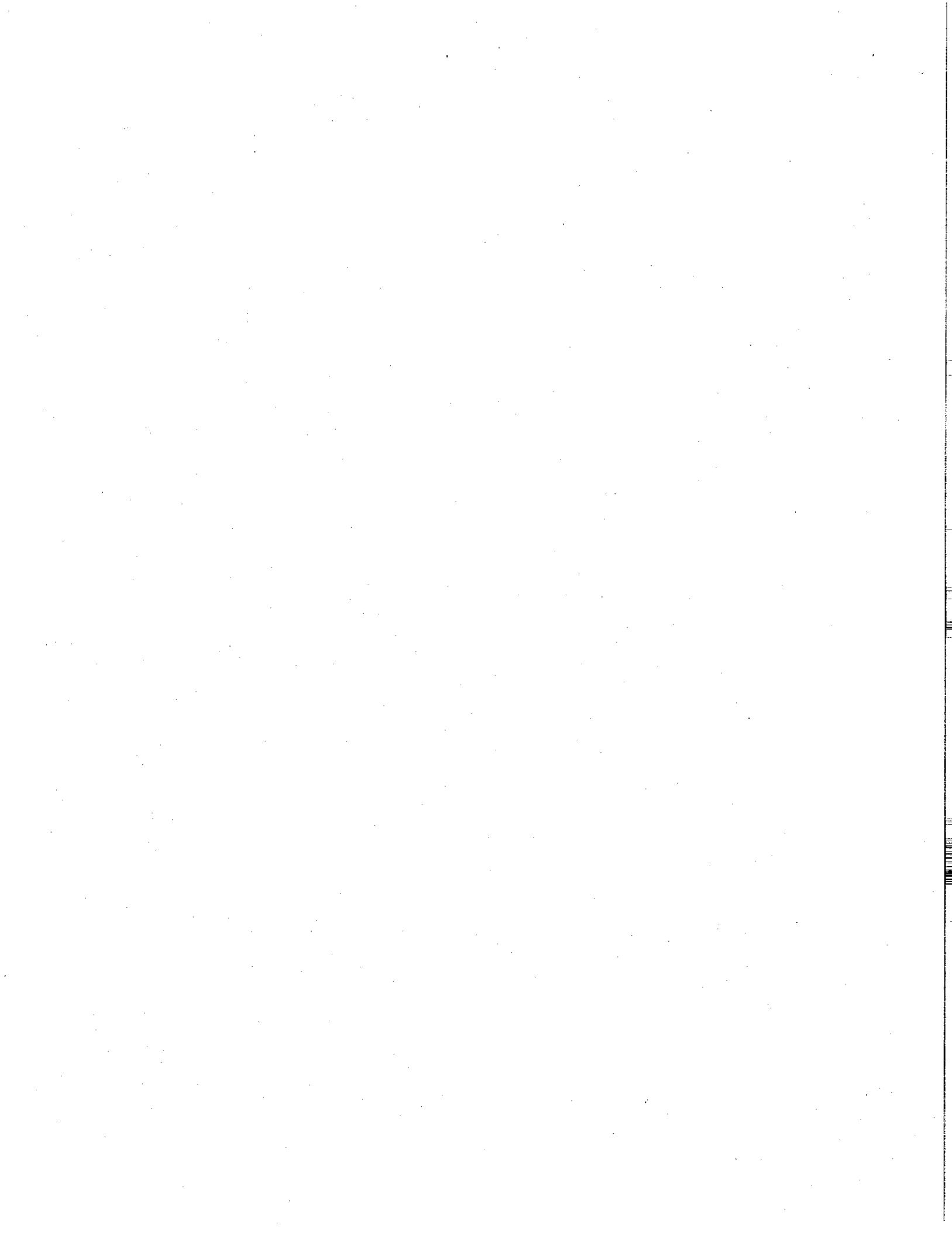
further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material facts on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

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

(Checked box indicates acknowledgement)

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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.

(Checked box indicates acknowledgement)

By signing the document below and clicking the "Submit" button, you are signing this Agreement electronically. You agree your electronic signature is the legal equivalent of your manual signature on this Agreement.

Applicant Digital Signature (Type Name):   connie rose kiep

Date: Wednesday, October 2, 2019

Please attach your resume here, if you do not attach it, please bring a hard copy of your resume to the in-person interview.

First and Last Name: ConnieRose Kiep
Email: Conniekiep @gmail-com
Phone number: 808-492-8523

Working Experience:

Company Name: Walmart Supercenter
Dates of Employment: 06/2019 - 10/2019
Job Responsibility:

- ○ Sales
- ○ Customer service
- ○ Front end associate
- ○ Cashier

Company Name: Belau Tourism Association
Dates of Employment: 08/2017 - 05/2018
Job Responsibility:

- ○ Hospitality / consumer assistance
- ○ Enumerator
- ○ Data Entry
- ○ Tourist Survey

Company Name: Halemalamalama Nursing Home
Dates of Employment: 01/2018 - 03/2018
Job Responsibility:

- ○ CNA
- ○ Nurse aid
- ○ Assist patients with daily activities
- ○ Data entry

Skills

- ○ POS System proficient
- ○ good communication skills
- ○ Computer Proficient (microsoft, internet, etc...)
- ○ Fast learner / problem solving skills.
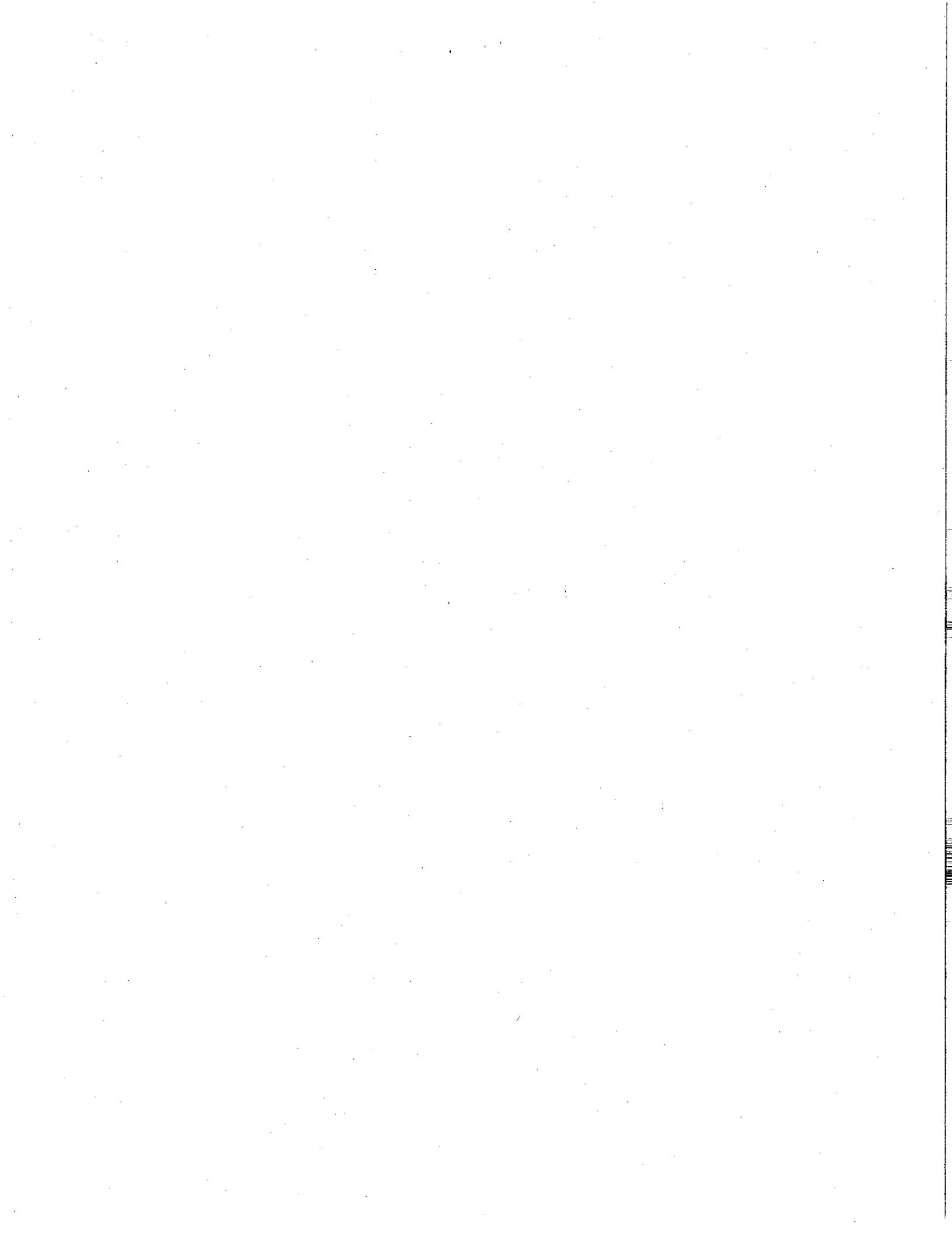
NOTICE TO EMPLOYEE
Labor Code section 2810.5

EMPLOYEE

Employee Name: _Connie Rose Kiep_

Start Date: _10/14/2019_

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: _Acrobat Outsourcing - The Service Companies_

Physical Address of Main Office: _1871 The Alameda Ste 110 San Jose, CA 95126_

Mailing Address: _1871 The Alameda Ste 110 San Jose, CA 95126_

Telephone Number: _(408) 844-0772_

WAGE INFORMATION

Rate(s) of Pay: _$19/hr_   Overtime Rate(s) of Pay: _$28.5/hr_

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

DLSE-NTE (rev 9/2014)

Insurance Carrier's Name: York Risk Services

Address: 1390 Willow Pass Road, Concord, CA. 94520

Telephone Number: 866.391.9615

Policy No.: NSWCC-0000101

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

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): _____

Ngoc Ho

(PRINT NAME of Employer representative)

(signature)

(SIGNATURE of Employer Representative)

10/14/2019

(Date)

CONNIE ROSE Ku ed

(PRINT NAME of Employee)

(signature)

(SIGNATURE of Employee)

10/14/2019

(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.

DLSE-NTE (rev 9/2014)

Acrobat
outsourcing

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.

<u>Tardy</u> – Anybody not signed/ clocked-in by their start time.	1 Point
<u>Call Off</u> – 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
<u>LM Call-Out</u> – Failing to provide Acrobat with 24-hour notice before missing a shift.	1 Points
<u>No Call No Show</u> – Failing to provide Acrobat with any notice before missing a shift.	3 Points

Name: _Connie Rose Kiep_   Date: _10/14/19_

Signature: _____