

Affiliate Acknowledgement & Consent

ACKNOWLEDGEMENT

its affiliated companies ("Cascade"), through a staffing agency, I				
	nowledge the following: (Print Name)	Affiliate Initials		
1.	I received my plant assignment, supervisor's name, and shift time for my assignment at Cascade.			
2.	I am attending in-person orientation at Cascade on			
	I understand I am not allowed to begin work at the plant without completing safety training.			
3.	I understand that I must punch in before the start of my shift, and punch out when I leave for the day. If I miss a punch, I understand that I must notify my supervisor.			
4.	I understand Cascade's attendance policy.			
5.	I understand that if I am injured while working, I must notify my supervisor immediately and follow Cascade's and my Staffing Agency's procedures .			
6.	I understand Cascade's dress code – shorts and t-shirts are fine, but nothing too short. No tank tops or anything that is inappropriate or could offend others. Shoes must have a closed toe and heel.			
7.	I understand that Cascade is a <u>nicotine-free</u> workplace. If I wish to smoke/vape/chew, I must be clocked out and off company property.			
8.	I understand that I will receive a Cascade badge and access card, which is assigned to me for use by me only and I not allow anyone else to use. Additionally, I will return if my assignment with Cascade ends.			



Affiliate Initials

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9.	I have / have not [check one] previously worked at a Cascade facility, either through a staffing agency or as an employee, and disclosed this at the time of my application.	
	Although previously working at a Cascade facility does not necessarily bar consideration for temporary assignment or future employment, I understand that Cascade is under no obligation to consider either. I also understand that if, during my temporary assignment at Cascade, it is discovered that I did not disclose this information at the time of application, my assignment may be ended.	
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., _	[Print Name] [Staffing Agency Name]	
any the	y permission to release to Cascade Engineering any information contained in my personne y other information, written or verbal, which is related to my work record or work performation previously listed Staffing Agency. I also consent to Cascade Engineering using such information and other employment purposes.	ance with
	Date:	
	Signature	