

[TOWNSHIP NAME]

EMPLOYEE HANDBOOK

Welcome to the [TOWNSHIP NAME]

Dear Team Member,

Welcome to [TOWNSHIP NAME]!

We are excited to have you as part of our progressive team. You were hired because we believe you can contribute to the achievement of the excellent public service, and share our commitment to our mission statement.

[TOWNSHIP NAME] is committed to distinctive and unparalleled customer service in all aspects of our constituency. As part of the team, you will discover that the pursuit of excellence is truly a rewarding aspect of your career with [TOWNSHIP NAME]. As a team member, you must "own" the results of your productivity.

This employee handbook contains the key policies, goals, benefits, and expectations of [TOWNSHIP NAME]; and other information you will need as part of our team.

The success of [TOWNSHIP NAME] is determined by our success in operating as a unified team. We have to earn the trust and respect of our citizens every day in order that the citizens make the decision to trust our services. We feature service and service is provided by people. There are no magic formulas. Our success is guaranteed by creative, productive employees who are empowered to make suggestions while thinking "outside the box." Your job, every job, is essential to fulfilling our mission to "provide distinctive quality and unparalleled customer service" everyday to more people who "trust and respect" us.

The primary goal at [TOWNSHIP NAME], and yours, is to live our mission statement and continue to be a leader in public service. We achieve this through dedicated hard work and commitment from every employee. It is the desire of [TOWNSHIP NAME]'s, from top to bottom, to have every employee succeed in their job, and assist in achieving our goals.

You should use this handbook as a ready reference as you pursue your career with [TOWNSHIP NAME]. Additionally, the handbook should assure good management and fair treatment of all employees. At [TOWNSHIP NAME], we strive to recognize the contributions of all employees.

Welcome aboard. We look forward to your contribution.

Sincerely,

[NAME, TITLE, TOWNSHIP]

10/07/08

[TOWNSHIP]

EMPLOYEE HANDBOOK

History of Townships

Township government, established in Providence, Rhode Island in 1636, is the oldest existing unit of government continuing to serve on the North American continent. Township government was in existence for 140 years prior to the signing of the Declaration of Independence in 1776. The wording of the Declaration of Independence reflects the fact that 38 of its 56 signers had experienced the benefits of township government.

The Declaration's statement that "government should derive its just powers from the consent of the governed" is demonstrated at the Annual Town Meeting held on the second Tuesday of each April. The Annual Town Meeting is still an important function of our nation's 17,000 townships after more than 360 years.

[TOWNSHIP]

EMPLOYEE HANDBOOK

Acknowledgement Form

This employee handbook has been prepared for your information and understanding of the policies, philosophies and practices and benefits of [TOWNSHIP NAME]. PLEASE READ IT CAREFULLY.

Upon receipt of this handbook, please sign the statement below, and return to your personnel representative by the due date. A reproduction of this acknowledgment appears at the back of this booklet for your records.

I, _____, have received a copy of the [TOWNSHIP NAME] Employee Handbook which outlines the goals, policies, benefits and expectations of The Township, as well as my responsibilities as an employee.

I have familiarized myself, at least generally, with the contents of this handbook. By my signature below, I acknowledge, understand, accept and agree to comply with the information contained in Employee Handbook provided to me by The Township.

I understand this handbook is not intended to cover every situation which may arise during my employment, but is simply a general guide to the goals, policies, practices, benefits and expectations of The Township.

I understand that The Township Employee Handbook is not a contract of employment and should not be deemed as such, and that I am an employee at will.

(Employee signature)

Please return by: _____
(put date here)

[TOWNSHIP]

EMPLOYEE HANDBOOK

Anti-Substance Abuse

[TOWNSHIP NAME] takes seriously the problem of drug and alcohol abuse, and is committed to provide a substance abuse free work place for it's employees. This policy applies to all employees of [TOWNSHIP NAME], without exception, including part-time and temporary employees.

No employee is allowed to consume, possess, sell or purchase any alcoholic beverage on any property owned by or leased on behalf of [TOWNSHIP NAME], or in any vehicle owned or leased on behalf of [TOWNSHIP NAME]. No employee may use, possess, sell, transfer or purchase any drug or other controlled substance which may alter an individual's mental or physical capacity. The exceptions are aspirin or ibuprofen based products and legal drugs which have been prescribed to that employee, which are being used in the manner prescribed.

[TOWNSHIP NAME] will not tolerate employees who report for duty while impaired by use of alcoholic beverages or drugs.

All employees should report evidence of alcohol or drug abuse to a department head or a personnel representative immediately. In cases where the use of alcohol or drugs pose an imminent threat to the safety of persons or property, an employee must report the violation. Failure to do so could result in disciplinary action for the non-reporting employee.

Employees who violate the Anti-Substance Abuse Policy will be subject to disciplinary action, including termination. It is our policy at [TOWNSHIP NAME] to assist employees and family members who suffer from drug or alcohol abuse. The employee may be eligible for a medical leave of absence, and we encourage any employee with a problem to contact township personnel representative for details.

As a part of our policy to ensure a substance abuse free workplace, [TOWNSHIP NAME] employees may be asked to submit to a medical examination and/or clinically tested for the presence of alcohol and/or drugs. Within the limits of federal and state laws, we reserve the right, at our discretion, to examine and test for drugs and alcohol.

Some such situations may include, but not be limited, to the following:

1. All employees who are offered employment with [TOWNSHIP NAME];
2. Where there are reasonable grounds for believing an employee is under the influence of alcohol or drugs;
3. As part of an investigation of any accident in the workplace in which there are reasonable grounds to suspect alcohol and/or drugs contributed to the accident;
4. On a random basis, where allowed by statute;
5. As a follow-up to a rehabilitation program, where allowed by statute;

6. As necessary for the safety of employees, customers, clients or the public at large, where allowed by statute; and
7. When an employee returns to duty after an absence other than from accrued time off such as vacation or sick leave.
- 8.

This is only a summary of [TOWNSHIP NAME]'s Anti-Substance Abuse Policy. You have been provided, and are required to read, the full policy. The full policy goes into greater detail and includes such subjects as definitions, testing methods, consequences of testing refusal, confidentiality, rights of employees and The Township, appeal procedures, notice of applicable statutes, voluntary assistance, etc. It is the employee's responsibility to obtain a copy from their personnel representative if one has not been provided to you. Employees will be required to sign a consent form agreeing to [TOWNSHIP NAME]'s Anti-Substance Abuse Policy in full.

It is a condition of your continued employment with [TOWNSHIP NAME] that employees comply with the Anti-Substance Abuse Policy.

NOTHING IN THE ANTI-SUBSTANCE ABUSE POLICY SHALL BE CONSTRUED TO ALTER OR AMEND THE AT-WILL EMPLOYMENT RELATIONSHIP BETWEEN [TOWNSHIP NAME] AND ITS EMPLOYEES.

[TOWNSHIP]

EMPLOYEE HANDBOOK

Confidentiality

[TOWNSHIP NAME] requires all employees to sign a confidentiality agreement as a condition of employment, due to the possibility of being privy to information which is confidential and/or intended for the township's use only. All employees are required to maintain such information in strict confidence. This policy benefits you, as an employee, by protecting the interests of The Township in the safeguard of confidential, unique and valuable information from competitors or others.

Should an occasion arise in which you are unsure of employee obligations under this policy, it is the employee's responsibility to consult with their reporting manager. Failure to comply with this policy could result in disciplinary action, up to and including termination.

[TOWNSHIP]

EMPLOYEE HANDBOOK

Employment Categories

Permanent Full-Time is an employee who has no termination date and who is regularly scheduled to work 37.75 to 40 hours per week.

Permanent Part-Time is an employee whose position has no termination date and who is scheduled to work 20 or more hours, but less than 37.75 hours per week.

Temporary Full-Time is an employee who is hired or promoted for certain length of time and who is scheduled to work 37.75 hours per week.

Temporary Part-Time is an employee who is hired or promoted for a certain length of time and who is scheduled to work 20 hour or more, but less than 37.75 hours per week.

[TOWNSHIP]

EMPLOYEE HANDBOOK

Equal Opportunity

[TOWNSHIP NAME] Corporation, Inc. is an Equal Opportunity Employer. This means that we will extend equal opportunity to all qualified individuals without regard for race, religion, color, sex, national origin, age, disability, handicaps or veterans status.

This policy affirms [TOWNSHIP NAME]'s commitment to the principles of fair employment and the elimination of all vestiges of discriminatory practices that might exist.

[TOWNSHIP]
EMPLOYEE HANDBOOK
PRIVACY POLICY

[TOWNSHIP NAME] Privacy in the Workplace Policy

Monitoring

The employee's work output, whether it be paperwork, computer files, products, customer calls or customer interaction, belongs to [TOWNSHIP NAME]. As such, that work output is always subject to review by [TOWNSHIP NAME], whether it is stored electronically, on paper or in any other form. In addition, township equipment, including computers, desks and lockers belong to [TOWNSHIP NAME] and are subject to search or investigation.

E-Mail and Computers

E-mail and other computer files provided by [TOWNSHIP NAME] are to be used for township purposes only. Use of [TOWNSHIP NAME] computer equipment for personal reasons is strictly prohibited and all computer pass codes must be available to [TOWNSHIP NAME] at all times. [TOWNSHIP NAME] reserves the right to enter, search and monitor the computer files or e-mail of any employee, without advance notice, for township purposes, such as investigating theft, disclosure of confidential business or proprietary information, personal abuse of the system or monitoring workflow or productivity.

[TOWNSHIP]

EMPLOYEE HANDBOOK

Sexual Harassment Policy

[Township name]'s position is that sexual harassment is a form of misconduct that undermines the integrity of the employment relationship. All employees have the right to work in an environment free from all forms of discrimination and conduct which can be considered harassing, coercive, or disruptive, including sexual harassment. Anyone engaging in harassing conduct will be subject to discipline, ranging from a warning to termination.

What is sexual harassment? Sexual harassment is defined as any unwanted physical, verbal or visual sexual advances, requests for sexual favors, and other sexually oriented conduct which is offensive or objectionable to the recipient, including, but not limited to: epithets, derogatory or suggestive comments, slurs or gestures and offensive posters, cartoons, pictures, or drawings.

When is conduct unwelcome or harassing? Unwelcome sexual advances (either verbal or physical), requests for favors and other verbal or physical conduct of a sexual nature constitute sexual harassment when:

- submission to such conduct is either an explicit or implicit term or condition of employment (e.g., promotion, training, timekeeping or overtime assignments)
- submission to or rejection of the conduct is used as a basis for making employment decisions (hiring, promotion, termination)
- the conduct has the purpose or effect of interfering with an individual's work performance or creating an intimidating, hostile, or offensive work environment

What is *not* sexual harassment? Sexual harassment does not refer to occasional compliments of a socially acceptable nature. It refers to behavior that is not welcome, that is personally offensive, that debilitates morale, and that, therefore, interferes with work effectiveness.

What should employees do if they are sexually harassed? If employees feel that they have been the recipient of sexually harassing behavior, report it immediately to the department head. It is preferable to make a complaint in writing, but they can accompany or follow up the with a verbal complaint written complaint.

If the department head is the source of the harassing conduct, report the behavior to that person's department head. *Complaints of sexual harassment will be investigated as confidentially and discreetly as possible.*

What happens after a complaint is made? Within [number] of days after a written complaint is made, a department head, or other person designated by the owner, will investigate the complaint. The person will speak with possible witnesses and will speak with the person named in the complaint. *Complaints of sexual harassment will be investigated as confidentially and discreetly as possible.* Upon receipt of the complaint, an investigation will be conducted.

[TOWNSHIP]

EMPLOYEE HANDBOOK

Smoking

Smoking in the Workplace

Because [TOWNSHIP NAME] is a building open to the general public, smoking at [TOWNSHIP NAME] is governed by state law or local ordinance. [TOWNSHIP NAME] does not allow employees who have private offices to smoke in their offices. Smoking is not allowed in [list no smoking areas]; however, smoking is allowed in [list designated smoking areas]. Please observe the posted no smoking signs.

Smoking/No-Smoking Signs

To support its policy of not allowing smoking in other than designated smoking areas, [TOWNSHIP NAME] has posted "No Smoking" and "Smoking" signs in the appropriate areas. Each sign posted in an area where smoking is prohibited carries the internationally recognized symbol for no smoking; a red circle containing a lit cigarette with a line drawn diagonally through the circle. Please observe these signs at all times.

[TOWNSHIP]

EMPLOYEE HANDBOOK

Mission Statement

Our goal at [TOWNSHIP NAME] is simple -- extraordinary customer service as we provide for our constituent's needs in the arena of public service. Our goals are accomplished by a commitment from every employee.

Our values and beliefs require that we:

- Treat each employee with respect and give them an opportunity for input on how to continually improve our service goals.
- Treat each employee fairly and with mutual respect. The Township does not tolerate discrimination of any kind and encourages all managers and department heads to involve employees in problem solving and the creativity process. When problems arise, the facts should be analyzed to determine ways to avoid similar problems in the future.
- Provide the most effective and efficient corrective action, to resolve customer service issues, to ensure our constituent's satisfaction and that the problem not be repeated in the future. In this way, we will not maintain our leadership position in providing service.
- Foster an open door policy which encourages interaction, discussions and ideas to improve the work environment, thus increase our productivity.
- Deliver impeccable service to our constituents and, where required, try to provide services that may be too difficult for others to achieve.

Make "Do It Right The First Time" our commitment as a team and our only way of doing business. This commitment will assure continued satisfaction.

[TOWNSHIP]

EMPLOYEE HANDBOOK

Violence in the Workplace Prevention Policy

Zero tolerance

This Township has a policy of zero tolerance for violence. If employees engage in any violence in the workplace, or threaten violence in the workplace, their employment will be terminated immediately for cause. No talk of violence or joking about violence will be tolerated.

“Violence” includes physically harming another, shoving, pushing, harassing, intimidating, coercing, brandishing weapons, and threatening or talking of engaging in those activities. It is the intent of this policy to ensure that everyone associated with this Township, including employees and customers, never feels threatened by any employee’s actions or conduct.

Workplace security measures

In an effort to fulfill this commitment to a safe work environment for employees, customers, and visitors, a few simple rules have been created. These are:

- Access to the Township’s property is limited to those with a legitimate Township interest.
- All employees and employee vehicles entering the property must display Township identification.
- All visitors and visitor vehicles must register and display identification while on the property.

All weapons banned

The Township specifically prohibits the possession of weapons by any employee while on Township property. This ban includes keeping or transporting a weapon in a vehicle in a parking area, whether public or private. Employees are also prohibited from carrying a weapon while performing services off the Township’s business premises.

Weapons include guns, knives, explosives, and other items with the potential to inflict harm. Appropriate disciplinary action, up to and including termination, will be taken against any employee who violates this policy.

Inspections

Desks, telephones, and computers are the property of the Township. We reserve the right to enter or inspect employee work area including, but not limited to, desks and computer storage disks, with or without notice.

The fax, copier, and mail systems, including e-mail, are intended for Township use. Personal business should not be conducted through these systems. Under conditions approved by management, telephone conversations may be monitored and voice mail messages may be retrieved in the process of monitoring customer service.

Any private conversations overheard during such monitoring, or private messages retrieved, that constitute threats against other individuals can and will be used as the basis for termination for cause.

Reporting violence

It is everyone's business to prevent violence in the workplace. Employees can help by reporting what they see in the workplace that could indicate that a co-worker is in trouble.

Employees are encouraged to report any incident that may involve a violation of any of the Township's policies that are designed to provide a comfortable workplace environment. Concerns may be presented to the employee's department head.

All reports will be investigated and information will be kept confidential.

[The following additional provisions deal with programs that, in general, are limited to larger Townships with a substantial workforce. They may be included, as applicable.]

Training programs

As part of its commitment to preventing workplace violence, the Township has established training programs for all employees. Training will be included as part of the employee's orientation. Thereafter, employees will be scheduled for annual refresher training during the month that they initially joined the Township.

Please be advised that training is mandatory and attendance will be taken. If an employee fails to attend training or make-up sessions, they will be subject to suspension without pay until training is completed.

Education offerings

In order to promote a peaceful working environment, we encourage department heads and employees to enroll in courses to learn more about working with each other. Courses covering communication, problem solving, building effective working relationships, stress management, and related or similar course topics are offered by TOI Education and, where appropriate, supported for attendance at outside seminars.

Employee assistance program

The Township provides an employee assistance program (EAP) for all full-time and part-time employees. This EAP offers services to these employees and their eligible dependents. While we receive periodic reports on the number and types of visits or calls

made to the EAP, we do not receive information about individual contacts with the EAP.

Employees are encouraged to use the EAP whenever they feel the need for guidance in coping with life's difficulties. If employees have difficulty handling drugs or alcohol, the EAP can provide information on treatment. The EAP is a confidential service to be used when help is needed.

Incident management

In the event of a major workplace incident that affects, or has the potential to affect, the mental health of our workforce, we will provide initial counseling and support services to employees and their immediate family members.

As the crisis passes and support systems are put into place for individuals affected by the incident, the Township will make every effort to return to normal business operations. A reasonable effort will be made to notify employees, constituents and others who need to know of the status of business operations directly whenever possible. In cases where direct contact is not possible or practical, an effort will be made to communicate through the news media and other available resources.

[TOWNSHIP]

EMPLOYEE HANDBOOK

Work hours and reporting

Workday

The normal workday is eight (8) hours for non-exempt, with 40 hours being a normal work week. Exempt employees generally work the same hours, but may be required to work more hours as the work dictates. While employees are generally expected to work the number of hours stated above, [TOWNSHIP NAME] does not guarantee that employees will actually work that many hours in any given day or week (or to be paid for such hours if employees do not work that many hours).

Overtime work is only performed when necessary and approved in advance by the department head. Employees are expected to work necessary overtime when requested to do so, and non-exempt employees will receive time and one-half pay for time worked exceeding 40 hours in any given work week. Full time employees will be paid double time for hours worked on a township's holiday, if they are not scheduled to work on that holiday. Part-time employees will be paid one and one-half times the regular rate of pay for working on a township's holiday. Exempt employees are not entitled to overtime pay. All overtime payments will be made in the pay period following the period the overtime was worked.

Time Clock and Time Cards

Where applicable, [TOWNSHIP NAME] employees must punch in before beginning their work shift and punch out at the end of their shift. All such employees are expected to work their entire shift. Any such employee punching five (5) minutes late will be docked fifteen (15) minutes of pay, or punches out later than the time their scheduled shift ends, without prior authorization, will be paid for the scheduled time only. Any digression from the above requirements could result in a reprimand to the employee.

Employees are not allowed to punch the time clock of another employee. Should the time card be incorrectly punched, for any reason, the department head will note the correct start and/or end time, and initial the correction. All time cards must be approved by the department head.

For employees required to complete time cards, the cards must be filled out with all hours worked and turned into the department head every other Friday as designated by [TOWNSHIP NAME], by 9:30 A.M. Vacations days, sick days, holidays, and absences such as jury duty, funeral leave or military training, must be specifically noted on the time cards for days on which they occur. Vacation and holidays should be counted as full work days. All time cards must be approved and signed by the department head prior to being sent to personnel.

[TOWNSHIP]

EMPLOYEE HANDBOOK

Termination/Resignation

VOLUNTARY

It is the policy of the Township to provide assistance to terminating employees as provided herein.

- Upon receiving notice from the employee, the department head should determine the reason for leaving and the termination date.
- The Township is will be responsible for processing all paperwork on terminating employees.
- An exit interview will be conducted.
- A Township representative will calculate final pay for terminating employees. Payment will be processed in accordance with Federal, State and local wage laws.
- References for terminated employees will be handled by the Township Official. A Township representative will contact the employee's department head for details of technical ability and job performance of the employee.

DISMISSAL

The Township believes all employees are valuable and that the dismissal of an employee is a serious matter for both the employee and the Township. However, a dismissal decision is a matter which is necessarily left to the judgement of the Township, and the Township retains the right to terminate employment at any time with or without cause, provided law does not prohibit such action.

[TOWNSHIP]

EMPLOYEE HANDBOOK

Removing Township Property

[TOWNSHIP NAME] will provide employees with the necessary equipment to do the job. None of this equipment should be used for personal use, nor removed from the physical confines of [TOWNSHIP NAME] - unless it is approved and the job specifically requires use of company equipment outside the physical facility of [TOWNSHIP NAME].

Computer equipment, including laptops, may not be used for personal use - this includes word processing and computing functions. It is prohibited to install any programs to a company computer without the written permission of the department head. These programs include, but are not limited to, games, online services, screen savers, etc. The copying of programs installed on the company computers is prohibited unless employees are specifically directed to do so in writing by the department head.

[TOWNSHIP]

EMPLOYEE HANDBOOK

Attendance Policy

Employee's timely attendance at work is crucial to making the Township run smoothly. We must meet constituent requirements to satisfy our goals and duties. Employees need to do their part in achieving this goal, and one way is to maintain a good attendance record. Any absence or tardiness becomes a part of their employment record.

Punctuality requirements. Employees are expected to be at their workstations on time. Tardiness is defined as being at the workstation at least [INSERT A NUMBER] minutes past the scheduled starting time. Employees should also notify the appropriate person when they know they may be late for work. Being on time makes it easier for all of us because tardiness hinders teamwork among employees. Being tardy for work or leaving the job station before quitting time will be considered cause for corrective action.

Counting absences. Here are the rules for how absences will be counted:

- An unscheduled absence for at least one-half the workday will be counted as one occurrence.
- An absence for one or more consecutive workdays will be considered one occurrence. For example, if you're out two consecutive days, that will count as one occurrence.
- If an employee returns from an absence (due to an illness) and goes out again due to the same illness after being at work for no more than one day, then the absence will be counted as one occurrence.

Repeated occurrences will result in verbal counseling, written counseling, and/or suspension or termination of employment.

Procedure. In the event that employees are unable to come to work, be sure to call in and let the appropriate person know, in advance where possible, but no later than the regular starting time, so that arrangements for other help can be made.

Vacation days must be scheduled at least 24 hours in advance except in cases of emergency.

Employees may be granted excused absences for sickness/illness when the appropriate person is notified prior to the start of work. Pre-scheduled medical/professional appointments (lawyers, clergy, counselors, etc.) or other compelling reasons, with prior supervisory approval, may also be considered as excused absences.

Absence of three or more consecutive scheduled working days without notifying the appropriate person will be considered as a voluntary termination, and employees will be

removed from the payroll.

Authorized absence documentation. We may require documentation of authorized reasons for absence, such as sick leave or jury duty, and may also verify the documentation where appropriate.

Inclement weather. The facility must continue to operate during periods of bad weather. Thus, the need for employees to be on the job during such emergencies is of paramount importance. Employees are expected to make every effort to report for work. If employees do not report for work when scheduled during a weather emergency, employees will be considered absent.

[TOWNSHIP]

EMPLOYEE HANDBOOK

Dress Code

As an employee of [TOWNSHIP], we expect employees to present a clean and professional appearance when employees represent us, whether that is in, or outside of, the office. Office personnel and those employees who come in contact with our public, are expected to dress in accepted conservative tradition.

All employees will conform to OSHA regulations regarding protective clothing, including but not limited to protective footwear.

[TOWNSHIP]

EMPLOYEE HANDBOOK

Personal Use of Telephone

The telephone lines at [TOWNSHIP NAME] must remain open for business calls and to service our customers. Employees are requested to discourage any personal calls - incoming and outgoing - with the exception of emergency calls.

No long distance calls are to be made on company phones which are not strictly business related.

[TOWNSHIP]

EMPLOYEE HANDBOOK

Personnel Records

It is important that the personnel records of [TOWNSHIP] be accurate at all times.

In order to avoid issues or compromising employee benefit eligibility or having W2's returned, [TOWNSHIP] expects that employees will promptly notify appropriate personnel representative of any change in name, home address, telephone number, marital status, number of dependents, or any other pertinent information which may change.

[TOWNSHIP]

EMPLOYEE HANDBOOK

Risk Management Statement

General policy statement

This is to inform employees that [TOWNSHIP NAME] is complying with the OSHA Hazard Communication Standard, Title 20 Code of Federal Regulations 1910.1200, by compiling a hazardous chemicals list, by using Material Safety Data Sheets, by ensuring that containers are labeled, and by providing employees with training.

This program applies to all work operations in [TOWNSHIP NAME] where employees may be exposed to hazardous substances under normal working conditions or during an emergency situation.

The [insert title of person in charge of safety] is the program coordinator who will review and update the program as necessary. Copies of the written program may be obtained from [insert name], whose office is located [insert location if different from employees' location].

Under this program, employees will be informed of the contents of the Hazard Communication Standard, the hazardous properties of chemicals with which employees work, safe handling procedures, and measures to take for protection from these chemicals. Employees will also be informed of the hazards associated with nonroutine tasks employees may be asked to perform.

List of hazardous chemicals

[Fill in the same name and title for both blanks.]

The [insert title of person in charge of safety] will make a list of all hazardous chemicals and related work practices used in the facility and will update the list as necessary. [TOWNSHIP NAME]'s list of chemicals identifies all of the chemicals used in its work process areas. A separate list is available for each work area and is posted there. Each list also identifies the corresponding MSDS for each chemical. A master list of these chemicals will be maintained by and is available from [insert name or title].

Material Safety Data Sheets (MSDS)

[Fill in the same name and title for each blank.]

The MSDS provide employees with specific information on the chemicals employees use. The [insert title of person in charge of safety] will maintain a binder with an MSDS for every substance on the list of hazardous chemicals. The MSDS will be a fully completed OSHA Form 174 or its equivalent. The MSDS will be made available to employees at their workstation during their shift.

10/07/08

The [insert title of person in charge of safety] is responsible for acquiring and updating the MSDS. If additional research is necessary or if an MSDS has not been supplied with an initial shipment of a chemical, the [insert title of person in charge of safety] will contact the chemical manufacturer or vendor. All new procurements for [TOWNSHIP NAME] must be cleared by the [insert title of person in charge of safety]. A master list of the MSDS is available from the [insert title of person in charge of safety].

Labels and other forms of warning

[Fill in the same name and title for both blanks.]

The [insert title of person in charge of safety] will ensure that all hazardous chemicals are properly labeled and updated as necessary. Labels will list, at least, the chemical identity of the contents, appropriate hazard warnings, and the name and address of the manufacturer, importer, or other responsible party.

The [insert title of person in charge of safety] will refer to the corresponding MSDS for each chemical to verify that the labeling is correct. Containers shipped from [TOWNSHIP NAME] will be checked by the shipping department to make sure that all containers are properly labeled.

If there are a number of stationary containers within a work area that have similar contents and hazards, signs will be posted on them to convey the hazard information. On stationary process equipment, regular process sheets, batch tickets, blend tickets, and similar written materials may be substituted for container labels when they carry the same information as the labels. The written materials are available to employees during work hours.

If employees transfer chemicals from a labeled container to a portable container that is intended only for their immediate use, no labels are required on the portable container. Pipes and piping systems are not labeled but their contents will be described in a training session.

Nonroutine tasks

When employees are required to perform hazardous nonroutine tasks, a special training session will be conducted to inform employees about the hazardous chemicals to which employees might be exposed while performing the nonroutine task and the proper precautions to take to reduce or avoid the risk of exposure.

Training

Everyone who works with or is potentially exposed to hazardous chemicals will receive initial training on the Hazard Communication Standard and the safe use of those hazardous chemicals by the [insert title of person in charge of safety]. Whenever a new hazard is introduced, additional training will be provided. Regular safety meetings will also be used to review the information presented in the initial training. Supervisory personnel will be extensively trained regarding hazards and appropriate protective

measures so that they will be available to answer questions from employees and provide daily monitoring of safe work practices.

The training program will emphasize these items:

1. Summary of the standard and this written program.
2. Chemical and physical properties of hazardous materials (for example, flash point, reactivity) and methods that can be used to detect the presence or release of chemicals (including chemicals in unlabeled pipes).
3. Physical hazards of chemicals (potential for fire, explosion, etc.).
4. Health hazards, including signs and symptoms of exposure, associated with exposure to chemicals and any medical condition known to be aggravated by exposure to the chemical.
5. Procedures to protect against hazards (personal protective equipment that is required and its proper use and maintenance; work practices or methods to assure proper use and handling of chemicals; and procedures for emergency response).
6. Work procedures to follow to assure protection when cleaning hazardous chemical spills and leaks.
7. Where MSDS are located, how to read and interpret the information on both labels and MSDS and how employees may obtain additional hazard information.

The [insert title of person in charge of safety] will review [TOWNSHIP NAME]'s employee training program and give advice regarding training and retraining needs. Retraining is required when the hazard changes or when a new hazard is introduced into the workplace, but it will be [TOWNSHIP NAME] policy to provide training regularly in safety meetings to ensure the effectiveness of its training program. As part of the assessment of the training program, the [insert title of person in charge of safety] will obtain input from employees regarding training that employees receive and suggestions for improving it.

Outside contractors

[Fill in the same name and title for both blanks.]

Upon notification of their presence or potential presence in [TOWNSHIP NAME]'s workplace, the [insert title of person in charge of safety] will advise outside contractors in person of any chemical hazards that may be encountered in the normal course of their work on [TOWNSHIP NAME] premises, the labeling system in use, the protective measures to be taken, and the safe handling procedures to be used. In addition, the [insert title of person in charge of safety] will notify these individuals of the location and availability of MSDS. Each contractor bringing chemicals on site must provide [TOWNSHIP NAME] with the appropriate hazard information on these substances, including the labels used and the precautionary measures to be take in working with these chemicals.

Additional information

All employees may obtain further information on [TOWNSHIP NAME]'s written program, the hazard communication standard, applicable MSDS and chemical information lists from the [insert title of person in charge of safety].

Recordkeeping

[TOWNSHIP NAME] is required to keep records on every workplace injury and to record any time employees are unable to perform their full duties because of a work-related injury or illness. [TOWNSHIP NAME]'s [insert title of person in charge of safety] maintains these records. Any time employees incur a workplace injury, an accident form must be sent to [insert title of person in charge of safety], no matter how minor the injury is.

Similarly, employees may not be excused from performing any of their regular work duties, unless employees have first obtained a work restriction form. If employees are unable to perform their regular work duties, employees must obtain a work restriction form from [insert title of person in charge of safety].

If their work restriction form expires and employees are still unable to perform their regular duties, employees must return to [insert title of person in charge of safety] for a new work restriction form.

Employees will see a listing of all occupational injuries and illnesses for the year posted [insert title of person in charge of safety] on February 1 of each year. Logs and summaries of occupational injuries and illness are kept by [TOWNSHIP NAME] for 5 years at the facility where the injury occurred or where the employee who took ill worked.

Posting

A poster describing [TOWNSHIP NAME]'s and employee responsibilities and duties under OSHA is displayed [insert location], along with other work-related informational posters. If employees have any questions about the information found on the poster or need assistance in understanding, reading, or having the poster translated, contact the [insert title of person in charge of safety].

Flash Point (Method Used)	Flammable Limits	LEL	UEL
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Extinguishing Media

Special Fire Fighting Procedures

Unusual Fire and Explosion Hazards

(Reproduce locally) OSHA 174 Sept. 1985

Section V—Reactivity Data

Stability	Unstable		Conditions to Avoid
	Stable		

Incompatibility (*Materials to Avoid*)

Hazardous Decomposition or Byproducts

Hazardous Polymerization	May Occur		Conditions to Avoid
	Will Not Occur		

Section VI—Health Hazard Data

Route(s) of Entry	Inhalation?	Skin?	Ingestion?
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Health Hazards (*Acute and Chronic*)

Carcinogenicity	NTP?	IARC Monographs?	OSHA Regulated?
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Signs and Symptoms of Exposure

Medical Conditions
Generally Aggravated by Exposure

Emergency and First Aid Procedures

Section VII—Precautions for Safe Handling and Use

Steps to Be Taken in Case Material Is Released or Spilled

Waste Disposal Method

Precautions to Be Taken in Handling and Storing

Other Precautions

Section VII—Control Measures

Respiratory Protection (*Specify Type*)

Ventilation	Local Exhaust	Special
	Mechanical (<i>General</i>)	Other

Protective Gloves	Eye Protection
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Other Protective Clothing or Equipment

Work/Hygienic Practices

[TOWNSHIP]

EMPLOYEE HANDBOOK

Safety and Accident Rules

Safety is a joint venture at [TOWNSHIP NAME]. [TOWNSHIP NAME] provides a clean, hazard free, healthy, safe environment in which to work in accordance with the Occupational Safety and Health Act of 1970. As an employee, employees are expected to take an active part in maintaining this environment. Employees should observe all posted safety rules, adhere to all safety instructions provided by the department head and use safety equipment where required. The work place should be kept neat, clean and orderly.

It is employee responsibility to learn the location of all safety and emergency equipment, as well as the appropriate safety contact phone numbers. A copy of the Emergency Procedures will be kept in each work area on top of the department head's desk.

All safety equipment will be provided by [TOWNSHIP NAME], and employees will be responsible for the reasonable upkeep of this equipment. Any problems with or defects in, equipment should be reported immediately to management.

As an employee, employees have a duty to comply with the safety rules of [TOWNSHIP NAME], assist in maintaining the hazard free environment, to report any accidents or injuries - including any breaches of safety - and to report any unsafe equipment, working condition, process or procedure, at once to a department head.

Employees may report safety violations or injuries anonymously to the Safety Committee, if they are not the injured or violating party.

NO EMPLOYEE WILL BE PUNISHED OR REPRIMANDED FOR REPORTING SAFETY VIOLATIONS OR HAZARDS. However, any deliberate or ongoing safety violation, or creation of hazard, by an employee will be dealt with through disciplinary action by [TOWNSHIP NAME], up to and including termination.

All work related accidents are covered by Worker's Compensation Insurance pursuant to the laws of the various states in which we operate.

Workplace Safety Rules

Employee safety is the constant concern of this Township. Every precaution has been taken to provide a safe workplace. [Name or title of the person in charge of safety] makes regular inspections and holds regular safety meetings. [He or she] also meets with management to plan and implement further improvements in our safety program. Common sense and personal interest in safety are still the greatest guarantees of employee safety at work, on the road, and at home. We take employee safety seriously and any willful or habitual violation of safety rules will be considered cause for dismissal. [TOWNSHIP NAME] is sincerely concerned for the health and well being of each

member of the team.

The cooperation of every employee is necessary to make this Township a safe place in which to work. Help yourself and others by reporting unsafe conditions or hazards immediately to the department head or to a member of the safety committee. Give earnest consideration to the rules of safety presented to employees by poster signs, discussions with the department head, posted department rules, and regulations published in the safety booklet. Begin right by always thinking of safety as employees perform the job, or as employees learn a new one.

Accident reporting. Any injury at work—no matter how small—must be reported immediately to the department head and receive first aid attention. Serious conditions often arise from small injuries if they are not cared for at once.

Specific safety rules and guidelines. To ensure employee safety, and that of coworkers, please observe and obey the following rules and guidelines:

- Observe and practice the safety procedures established for the job.
- In case of sickness or injury, no matter how slight, report at once to the department head. In no case should an employee treat his own or someone else's injuries or attempt to remove foreign particles from the eye.
- In case of injury resulting in possible fracture to legs, back, or neck, or any accident resulting in an unconscious condition, or a severe head injury, the employee is not to be moved until medical attention has been given by authorized personnel.
- Do not wear loose clothing or jewelry around machinery. It may catch on moving equipment and cause a serious injury.
- Never distract the attention of another employee, as this might cause him or her to be injured. If necessary to get the attention of another employee, wait until it can be done safely.
- Where required, employees must wear protective equipment, such as goggles, safety glasses, masks, gloves, hair nets, etc.
- Safety equipment such as restraints, pull backs, and two-hand devices are designed for employee protection. Be sure such equipment is adjusted for you.
- Pile materials, skids, bins, boxes, or other equipment so as not to block aisles, exits, fire fighting equipment, electric lighting or power panel, valves, etc. FIRE DOORS AND AISLES MUST BE KEPT CLEAR.
- Keep employee work area clean.
- Use compressed air only for the job for which it is intended. Do not clean employee clothes with it and do not fool with it.

- Observe smoking regulations.
- Shut down your machine before cleaning, repairing, or leaving.
- Tow motors and lift trucks will be operated only by authorized personnel. Walk-type lift trucks will not be ridden and no one but the operator is permitted to ride the tow motors. Do not exceed a speed that is safe for existing conditions.
- Running and horseplay are strictly forbidden.
- Do not block access to fire extinguishers.
- Do not tamper with electric controls or switches.
- Do not operate machines or equipment until you have been properly instructed and authorized to do so by the department head.
- Do not engage in such other practices as may be inconsistent with ordinary and reasonable common sense safety rules.
- Report any UNSAFE condition or acts to the department head.
- HELP TO PREVENT ACCIDENTS.
- Use designated passages when moving from one place to another; never take hazardous shortcuts.
- Lift properly—use the legs, not the back. For heavier loads, ask for assistance.
- Do not adjust, clean, or oil moving machinery.
- Keep machine guards in their intended place.
- Do not throw objects.
- Clean up spilled liquid, oil, or grease immediately.
- Wear hard sole shoes and appropriate clothing. Shorts or mini dresses are not permitted.
- Place trash and paper in proper containers and not in cans provided for cigarette butts.

Safety checklist. It's every employee's responsibility to be on the lookout for possible hazards. If you spot one of the conditions on the following list—or any other possible

hazardous situation—report it to the department head immediately.

- Slippery floors and walkways
- Tripping hazards, such as hose links, piping, etc.
- Missing (or inoperative) entrance and exit signs and lighting
- Poorly lighted stairs
- Loose handrails or guard rails
- Loose or broken windows
- Dangerously piled supplies or equipment
- Open or broken windows
- Unlocked doors and gates
- Electrical equipment left operating
- Open doors on electrical panels
- Leaks of steam, water, oil, etc.
- Blocked aisles
- Blocked fire extinguishers, hose sprinkler heads
- Blocked fire doors
- Evidence of any equipment running hot or overheating
- Oily rags
- Evidence of smoking in non-smoking areas
- Roof leaks
- Directional or warning signs not in place
- Safety devices not operating properly
- Machine, power transmission, or drive guards missing, damaged, loose, or improperly placed

Safety equipment. The department head will see that you receive the protective clothing and equipment required for the job. Use them as instructed and take care of them. You will be charged for loss or destruction of these articles only when it occurs through negligence.

Safety shoes. The Township will designate which jobs and work areas require safety

shoes. Under no circumstances will an employee be permitted to work in sandals or open-toe shoes.

A reliable safety shoe vendor will visit the Township periodically. Notices will be posted prior to the visits.

Safety glasses. The wearing of safety glasses by all shop employees is mandatory. Strict adherence to this policy can significantly reduce the risk of eye injuries.

Seat belts. All employees must use seat belts and shoulder restraints (if available) whenever they operate a vehicle on Township business. The driver is responsible for seeing that all passengers in front and rear seats are buckled up.

Good housekeeping. The work location should be kept clean and orderly. Keep machines and other objects (merchandise, boxes, shopping carts, etc.) out of the center of aisles. Clean up spills, drips, and leaks immediately to avoid slips and falls.

Place trash in the proper receptacles. Stock shelves carefully so merchandise will not fall over upon customer contact.

[TOWNSHIP]

EMPLOYEE HANDBOOK

Job Objectives, Performance Reviews, Salary Reviews

Within one week of employment, job change or promotion, every employee will be given job objectives which detail the requirements and expectations of the position for which the employee was hired. [TOWNSHIP NAME] will measure your job performance against these objectives. After every evaluation, job objectives will be dated and reviewed, if no changes are made; or rewritten as appropriate. In either case, the reporting department head will review and discuss the objectives with the employee and the employee will sign a statement indicating agreement with, and understanding of, these objectives.

Performance reviews are normally conducted every six (6) months from the date of hire, with the exception of a three month review at the end of your probationary period. All performance reviews are based on merit, achievement, job description fulfillment and performance at your position. Wage increases will be based upon this review, as well as past performance improvement; dependability; attitude; cooperation; any necessary disciplinary action; adherence to all employment policies; and your position in your salary range. Your reporting department head will review and discuss your salary range and your position within that range during your performance reviews. When you are promoted to a higher level position, you are automatically eligible for an increase as dictated by the salary range of that position.

[TOWNSHIP NAME]
EMPLOYEE HANDBOOK

Payroll

[TOWNSHIP NAME] employees are paid bi-weekly. Our payroll process includes:

Direct Deposit

While an employee can certainly have his/her actual pay check delivered direct to their desk each pay period, [TOWNSHIP NAME] provides, and encourages, direct deposit of paychecks. This is a service which saves time and provides added security. With this option, each paycheck will be automatically deposited to your checking or savings account (or divided between the two) as you direct. Each pay day, you still receive a pay stub for your records -- much like a voided check with all the same information which would appear on your regular check -- except the face of the check is voided. No trips to the bank are necessary because your salary appears in your bank account on payday, or in some cases the night before. Direct Deposit will be initiated one pay period following the receipt of the signed authorization form from the employee.

Payroll Deductions

As required by law, [TOWNSHIP NAME] will deduct Federal Social Security and Income Tax from your payroll check each pay period. Group Insurance premiums for eligible employee and dependent family members will be deducted from payroll check each pay period, once the employee completes the appropriate authorization forms.

Overtime Payment Policy

It is the policy of The [TOWNSHIP NAME] to comply fully with all federal and state laws, order and regulations as to hours of work and salary rates.

[TOWNSHIP]

EMPLOYEE HANDBOOK

Continuation of Medical/COBRA

(PLEASE SEE CURRENT STATUTES FOR UPDATES BEFORE INCLUDING THIS IN THE EMPLOYEE HANDBOOK)

Upon termination from [TOWNSHIP NAME] for any reason other than gross misconduct, an employee may elect to continue group medical coverage at group rates as long as the employee pays the required monthly premium. It is also possible to convert other group plans to individual plans. Details on the conversion of any benefits will be discussed with employees at the time of their termination by a personnel representative. Employees may, of course, request information on this subject at any time prior to actual termination.

TO QUALIFY FOR COBRA COVERAGE

Employees. As an employee of [TOWNSHIP NAME] covered by [Group Health Plan Name], employees have the right to elect this continuation coverage if employees lose their group health coverage because of a reduction in their hours of employment or the termination of their employment (for reasons other than gross misconduct on their part).

Retirees. As a retiree, spouse of a retiree, or dependent child of a retiree, of [TOWNSHIP NAME] covered by [Group Health Plan Name] employees have the right to elect this continuation coverage if employees lose their group health coverage because [TOWNSHIP NAME] declares itself in receivership and employees lose their group health care coverage within one year before or after the bankruptcy proceedings.

Spouses. As the spouse of an employee covered by [Group Health Plan Name], employees have the right to choose continuation coverage for themselves if employees lose group health coverage under [Group Health Plan Name] for any of the following reasons:

- The death of their spouse who was an employee of [TOWNSHIP NAME]
- A termination of their spouse's employment (for reasons other than gross misconduct)
- A reduction in their spouse's hours of employment
- Divorce or legal separation from their spouse
- Their spouse becomes entitled to Medicare

Dependent Children. In the case of a dependent child of an employee covered by [Name of Group Health Plan], he or she has the right to continuation coverage if group health coverage under [Name of Group Health Plan] is lost for any of the following

reasons:

- The death of a parent who was an employee of [TOWNSHIP NAME]
- The termination of a parent's employment (for reasons other than gross misconduct) or reduction in a parent's hours of employment with [TOWNSHIP NAME]
- Parent's divorce or legal separation
- A parent who was an employee of [TOWNSHIP NAME] becomes entitled to Medicare
- The dependent ceases to be a "dependent child" under [Name of Group Health Plan].

THEIR NOTICE OBLIGATIONS

Under the law, the employee or a family member has 60 days from (1) the date of the event or (2) the date on which coverage would be lost, whichever is later, to inform [Name and Address of Plan Administrator] of the employee's divorce or legal separation, or of the employee's child losing dependent status under [Name of Group Health Plan]. Please give notice in the following manner: [specify if employees want the person to call employees, write to employees, etc.]

Failure to give notice within the time limits can result in COBRA coverage being forfeited.

[TOWNSHIP NAME] has the responsibility to notify [Name of Plan Administrator] of the employee's death, termination of employment, reduction in hours, or Medicare entitlement.

TO ELECT COVERAGE

When [Name of Plan Administrator] is notified that one of these events has happened, [Name of Plan Administrator] will in turn notify the employee, spouse and dependents that they have the right to choose COBRA continuation coverage. The employee and spouse have independent election rights. The employee, spouse and dependents have 60 days from either (1) the date coverage is lost under [Name of Group Health Plan] or (2) the date of the notice, whichever is later, to respond informing [Name of Plan Administrator] that they want to elect continuation coverage. There is no extension of the election period.

If an employee, spouse or dependent does not elect continuation coverage within this election period, then rights to continue group health insurance will end.

If an employee, spouse or dependent chooses continuation coverage and pays the applicable premium, [TOWNSHIP NAME] is required to provide coverage which, as of the time coverage is being provided, is identical to the coverage provided under the plan to similarly situated active employees or family members. If [TOWNSHIP NAME]

changes or ends group health coverage for similarly situated active employees, their coverage will also change or end.

DURATION OF COBRA COVERAGE

Termination or Reduction in Hours. If group health coverage was lost because of a termination of employment (other than for reasons of gross misconduct) or a reduction in work hours, the continuation coverage period is 18 months from the date of the qualifying event, if elected.

Employees, Spouses or Dependents with Disabilities. The 18 months of continuation coverage can be extended to 29 months if the Social Security Administration determines that the employee, spouse or dependent child was disabled on the date of the qualifying event according to Title II (Old Age Survivors and Disability Insurance) or XVI (Supplemental Security Income) of the Social Security Act. Disabilities that occur after the qualifying event do not meet the criteria for the extended COBRA coverage period.

The employee, spouse or dependent must obtain the disability determination from the Social Security Administration and notify [Name of Plan Administrator] of the result within 60 days of the date of disability determination and before the close of the initial 18-month period. The employee, spouse or dependent has 30 days to notify [Name of Plan Administrator] from the date of a final determination that he or she is no longer disabled.

Multiple Events. The 18-month continuation period can also be extended, if during the 18 months of continuation coverage, a second event takes place (divorce, legal separation, death, Medicare entitlement, or a dependent child ceasing to be a dependent). The 18 months of continuation coverage will be extended to 36 months from the date of the original qualifying event. Upon the occurrence of a second event, it is the employee's, spouse's or dependent's responsibility to notify [Name of Plan Administrator] within 60 days of the event and within the original 18-month COBRA period. COBRA coverage does not last beyond 36 months from the original qualifying event, no matter how many events occur.

DURATION OF COBRA COVERAGE

Other Qualifying Events. If group health coverage was lost because of the death of the employee, divorce, legal separation, Medicare entitlement, or a dependent child ceasing to be a dependent child under [Name of Group Health Plan], then the continuation coverage period is 36 months from the date of the qualifying event, if elected.

COBRA CANCELLATION

The law provides that continuation coverage may be cut short for any of the following reasons:

- [TOWNSHIP NAME] no longer provides group health coverage to any of its employees
- The premium for continuation coverage is not paid in a timely manner
- The employee, spouse or dependent becomes covered under another group health plan that does not contain any exclusion or limitation with respect to any preexisting condition
- The employee or spouse becomes entitled to Medicare
- The employee, spouse or dependent extended continuation coverage to 29 months due to a Social Security disability and a final determination has been made that he or she is no longer disabled
- The employee, spouse or dependent notifies [Name of Plan Administrator] that they wish to cancel continuation coverage.

PREMIUMS

An employee, spouse or dependent does not have to show that they are insurable in order to choose continuation coverage. But an employee, spouse or dependent must have been actually covered by the group health plan the day before the qualifying event in order to elect COBRA coverage.

An employee, spouse or dependent may have to pay all of the applicable premium, which generally can not exceed 102% of the plan costs for a 12-month period. An exception exists for coverage of employees with disabilities during the extension from the 19th month to the 29th month. During that time, 150% of the plan cost may be charged. The group health plan may increase the cost that must be paid for COBRA coverage if the applicable premium increases.

The period for paying the initial COBRA premium following the election of coverage is 45 days. The first payment made is to be applied retroactively toward coverage for the period beginning after the date on which coverage would have been lost as a result of the qualifying event.

There is a 30-day grace period following the date regularly scheduled monthly premiums are due. Only in the case of mental incapacity is any further extension permitted, since the group health plan does not permit extensions.

CONVERSION PRIVILEGES

At the end of the continuation coverage period, the employee, spouse or dependent must be allowed the option to enroll in an individual conversion health plan provided under [Name of Group Health Plan] if such conversion plan is available.

FURTHER INFORMATION

If employees have any questions about the law or their obligations, please contact [Name of Plan Administrator, Address, and Telephone Number].

[TOWNSHIP]

EMPLOYEE HANDBOOK

Health Benefits

[TOWNSHIP NAME] makes health insurance, life insurance and accidental death coverage (group benefits) available to eligible employees (see definitions) and their eligible family members. The Township pays the majority of the premiums for the group benefits, with the employee sharing the balance of the cost. Single and family plans are set at different contribution rates. Long term disability benefits are also offered at no cost to employees.

The low cost of these benefits is an important part of each eligible employee's compensation package. Eligible employees may also purchase optional life insurance for spouses and dependents.

Eligible employees are all full-time employees who have completed ninety (90) calendar days of employment; and part-time employees who work at least twenty-five (25) regular hours a week and have completed ninety (90) calendar days of employment. Specific details on coverage and benefits are outlined in [TOWNSHIP NAME]'s Health Benefit Handbook. It is provided to employees during orientation. Employees will also receive authorization forms for all benefits at orientation. Please see the department head if orientation has not been scheduled or you have not received the Benefit Handbook.

[TOWNSHIP]

EMPLOYEE HANDBOOK

IMRF

Following is a brief overview of their retirement benefits. Please refer to the IMRF guide for full details.

Benefit eligibility at a glance for active IMRF members

Refund of member contributions

Employees may receive a refund of their member contributions if employees terminate employment—that is, employees stop working for their IMRF employer. If employees take a refund, employees give up all of their IMRF benefits.

Disability benefits under the Regular and SLEP plans

12 consecutive months of service credit

9 of the 12 months of service must immediately precede disability

Not be receiving any earnings from any IMRF employer

Unable to perform duties assigned by the member's employer because of illness or injury

Disabled for more than 30 days

Death benefits under the Regular and SLEP plans (service credit requirements)

Less than one year, death not job related: return of member contributions

Less than one year, death is job related: one year's salary plus return of member contributions

More than one year, less than eight years: one year's earnings plus return of member contributions with interest

More than eight years: surviving spouse pension plus \$3,000 payment or one year's earnings plus return of member contributions with interest

Retirement benefits

Upon retiring from an IMRF position and being vested with IMRF, employees are eligible for a monthly pension for the rest of their life.

Vesting refers to the number of years of service credit employees need to qualify for an IMRF pension. In IMRF employees qualify for a pension at age 60 (normal retirement age) if employees have at least eight years of service credit. Exceptions to the normal retirement age exist but may affect the amount of their pension.

Vesting for a Regular IMRF pension

After eight years of service credit

Normal pension (unreduced pension)

At age 55 with at least 35 years of service credit

At age 60 with at least eight years of service credit

Early pension (reduced pension)

Between the ages of 55 and 60 with less than 35 years of service credit

[TOWNSHIP]

EMPLOYEE HANDBOOK

Short-term Disability

Short term disability (STD) benefits provide income continuation during periods of serious illness resulting in total disability. Employees are "totally disabled" if employees are unable to perform their job due to major illness or accidental bodily injury. [TOWNSHIP NAME] employees bear no cost for this plan benefit which provides up to 180 days of short term disability benefits within a twelve-month period.

The employee's total disability period must exceed ten (10) consecutive working days to qualify for STD benefits; and all Sick Leave benefits must be exhausted before an employee can request STD benefits. Once the initial ten (10) day waiting period is met, STD benefits will be retroactive to the first unpaid day of absence (if sick leave benefits are exhausted).

Regular full-time and regular part-time employees of [TOWNSHIP NAME] are eligible for this benefit once they have completed ninety (90) calendar days of service and work at least thirty (30) days per week on a regular basis.

Under STD benefits, eligible employees are paid 80% of their normal base salary. This means the employee will be paid based upon their regular rate of pay excluding overtime, bonus, vacation, and any other accrued paid leave or additional compensation. STD benefits may not exceed 80% of their base salary, unless augmented by available accrued vacation. If additional payments from worker's compensation or state disability, while employees are on STD benefits, increase their overall benefits to exceed 80%, their STD benefits will be reduced accordingly. Group health benefits will continue on the same basis as prior to the onset of STD benefits. STD benefits will be subject to all payroll withholding elections of the employee which were in effect prior to the short term disability.

It is important that an employee provide their department head with the treating doctor's statement as soon as employees know an illness or injury will result in an absence greater than ten (10) days. The doctor's statement must identify the nature of their disability and the date employees are expected to be able to return to work. [TOWNSHIP NAME] may require a second medical opinion, at its own expense, and periodic recertification s. If there are discrepancies in the first and second opinions, we may require a third doctor to render a medical opinion. This third doctor will be selected jointly by [TOWNSHIP NAME] and the employee, and the third opinion will be binding both on us and the employee.

Upon returning to work, employees must provide a release, or return to work form, from the doctor treating their illness or injury.

[TOWNSHIP]

EMPLOYEE HANDBOOK

Worker's Compensation

Employees who are injured on the job at [TOWNSHIP NAME] are covered by Worker's Compensation Insurance. It is their responsibility to immediately notify their immediate department head - or in the absence of their department head, the next available department head - of any injuries employees sustain while on the job at [TOWNSHIP NAME].

This department head will notify their personnel representative. We encourage injured employees to seek immediate medical attention. All medical expenses related to the treatment of an injury, sustained on the job, are paid in full direct to the medical providers. After a specified waiting period, employees are also eligible for disability payments set forth by state law, where necessary.

The Worker's Compensation plan is administered by a separate insurance company who will be notified by their personnel representative. A representative of the administering company will contact employees. Information on the current company administering this plan will be provided to employees by their personnel representative and is available on posters displayed in their work area. Additional information on Worker's Compensation Insurance is available through the Personnel office.

[TOWNSHIP]

EMPLOYEE HANDBOOK

Family Medical Leave Act

[TOWNSHIP NAME] has a Family and Medical Leave Policy that is in compliance with The Family and Medical Leave Act of 1993 (FMLA), which is unpaid leave absence. Eligible employees must be employed by [TOWNSHIP NAME] at least twelve (12) months (but this period need not be consecutive) and have worked at least 1250 hours of service during the twelve month period prior to the request. [TOWNSHIP NAME] locations with less than 50 employees within a seventy-five mile radius are not covered under this leave policy or the FMLA.

Under the Leave Policy a total of up to twelve (12) weeks unpaid leave of absence is available to eligible employees under the following circumstances:

- The birth of a child, but only within the first twelve months of the birth. The placement of a child for adoption or other legal placement, within the first twelve months of the adoption or placement.
- The need to care for a dependent, spouse or parent who has a serious medical condition.
- The serious health condition of the requesting employee, which renders the employee unable to perform the functions of his/her position.

During the unpaid leave, employees retain the same medical and dental coverage and must still contribute the same amount toward medical benefits as he/she paid before the leave began. (See benefits exception below) Upon return to [TOWNSHIP NAME] at the end of the leave, the employee will be restored to his/her former position with the same rights, benefits, pay and other terms and conditions which existed prior to the leave; or to an equivalent position with equivalent rights, benefits, pay and other terms and conditions of employment.

The Township reserves the right to deny leave reinstatement to key employees, where such denial is necessary to prevent substantial and grievous economic injury the Township's operations. Key employees will be notified of the Township's intention to deny reinstatement as soon as a determination is made that such injury would occur. In the event such employee decides not to return to work from unpaid leave, he/she will remain on leave for the balance of the leave period and then be terminated. Key employees are defined as the highest- paid ten percent of employees employed by the Township within seventy-five mile radius of the facility where the employee is employed. Employees will be required to use all accrued vacation and floating holidays prior to being granted unpaid leave as outlined above for the birth or placement of a child, or to care for a seriously ill family member. The birth parent may choose to use the unpaid twelve week leave or to utilize the 6 week paid maternity leave, but cannot use both. If the employee requests the leave due to his/her own serious health condition, the

employee may also be eligible for sick leave pay or short term disability payments if the condition of the leave meets the qualifications of those plans.

Employees requesting leave for their own or an eligible family member's serious health condition, will be required to provide medical certification. Medical certification must be provided thirty (30) days in advance of the request for leave when possible.

[TOWNSHIP NAME] may, at its discretion, require a second medical opinion on the health condition and periodic recertification s at The Township's expense.

Other exceptions/provisions:

When both spouses work for [TOWNSHIP NAME], their aggregate leave in any twelve-month period may be limited to twelve weeks total, if the leave is taken for the birth or adoption of a child.

- Intermittent or reduced leave may be taken in case of a serious health condition, either an employee's own or that of a child, spouse or parent, when medically necessary. The birth or placement of a child does not qualify for intermittent or reduced leave.
- Employees out on unpaid leave will be required to contact their super- visors, at least every four (4) weeks, to report on their status and intention to return to work at the end of their leave.
- Benefits based on an accrual basis (e.g. vacation, sick leave, floating holidays, etc.) will not accrue during unpaid leave under this policy.
- While on unpaid leave, an employee will not accrue seniority or service time for eligibility for a performance review, salary review, salary review, adjustment or bonus.
- Employment benefits which are accrued prior to the unpaid leave will not be lost.
- As previously stated, group health insurance will continue on the same basis as prior to the leave, as long as the employee continues to pay his/her contribution as required before the unpaid leave.

An employee on leave for his/her own serious health condition, will be required to provide certification from his/her health care provider that the employee is able to return to work and perform all of the functions of the job to which the employee is returning.

PLEASE SEE RECENT CHANGES TO FMLA LAW BEFORE INSERTING THIS INTO YOUR HANDBOOK. AS ALWAYS, PLEASE REVIEW WITH YOUR TOWNSHIP ATTORNEY.

[TOWNSHIP]

EMPLOYEE HANDBOOK

Vacation Policy

Vacation is paid by [Township Name] to regular full-time employees as follows:

- First year of employment: [one] week
- Second through third year of employment: [two] weeks
- Third through tenth year of employment: [three] weeks
- Tenth through twentieth year of employment: [four] weeks
- Over twenty years of employment: [five] weeks

All employees are required to give at least [one month's] notice of their vacation plans to their department head.

Employees are required to take their vacation within [one] calendar year after you earn it. Employees will not be eligible to receive pay instead of vacation time except with Township permission or upon termination. Vacation time, which is taken prior to being earned, is considered an advancement of wages and, upon termination, will be deducted from their paycheck. Any conflict in vacation requests will be decided based on employee seniority and Township needs. Employees will not be entitled to accrued vacation during periods when employees are on personal leave of absence or if employees are suspended from the Township.

If a holiday occurs during their vacation period employees will be granted one additional day of vacation. [If employees are sick during their vacation period employees may not count that day towards sick pay.] Employees must take vacation in a minimum of one week allotments unless specifically approved of by their department head.

Employees are not eligible for any paid vacation until employees have completed one year of employment with the Township. For example, if employees leave the Township after nine months of employment, employees will not be eligible for any vacation pay benefits. After one year of employment, [one week] of vacation will accrue. After the second year of employment and onward, employees will begin accruing vacation at subsequent anniversary dates.

Employees are encouraged to use available paid vacation time for rest, relaxation, and personal pursuits. In the event that available vacation is not used by the end of the benefit year, employees may carry unused time forward to the next benefit year. If the total amount of unused vacation time reaches a "cap" equal to [two times the annual vacation amount], further vacation accrual will stop. When the employee uses paid

vacation time, and brings the available amount below the cap, vacation accrual will begin again up to the cap limit.

Employees will be paid for unused vacation time that has been accrued through the last day of work upon termination of employment.

[TOWNSHIP]

EMPLOYEE HANDBOOK

Funeral Leave

[TOWNSHIP NAME] allows three (3) days off, with pay, for a death in an employee's immediate family. Immediate family includes parents, spouse, children, brothers, sisters, mother-in-law, father-in-law, grandparents, or grandchildren.

Employees may request up to an additional two (2) days, which must be approved by their immediate department head. If accrued vacation is available, this benefit will be used for the additional two days; otherwise, the additional two days will be unpaid.

Funeral leave for death of other than immediate family must be approved by the department head. Absence for such a death is limited to two (2) days and will be unpaid.

[TOWNSHIP]

EMPLOYEE HANDBOOK

Jury Duty Policy

Paid Absence

Time off taken for jury duty is treated as a paid absence. Employees are paid for the time they are absent for jury duty, less the amount they receive for performing jury duty service.

[The above clause for pay during jury duty should be edited to reflect any change in the jury duty laws in Illinois.]

Advance Notice

Employees must give advance notice of the need for time off for jury duty. A copy of the summons should accompany the request.

[The above clause for notification of need for jury leave should be edited to reflect any change in the jury duty laws in Illinois.]

Return to Work

If employees are dismissed from jury duty before the end of the workday, they must report to work for instructions on whether or not to return for work for the rest of the workday.

[TOWNSHIP]

EMPLOYEE HANDBOOK

Maternity Leave

[TOWNSHIP NAME] employees are allowed up to six (6) weeks of leave after they have given birth to or following the adoption of a child. During this time, such employees will be paid at 70% of their regular salary. Additional time may be allowed under extraordinary circumstances with the permission of the department head.

[TOWNSHIP]

EMPLOYEE HANDBOOK

Military Leave

Military Activities

[TOWNSHIP NAME] will grant the employee's request for military leave of absence to be used for military training, reserve duty, drills, maneuvers, etc. according to Federal guidelines. In addition, if the employee should be called to active duty, the employee may take active duty leave, according to Federal guidelines. Military leave is only granted to [TOWNSHIP NAME]'s permanent employees.

Employment Rights

The employee's employment rights will be preserved while the employee is on military leave. Pay increases, vacations, and other benefits that would have accrued had the employee not been on military leave of absence will be given to the employee upon returning to [TOWNSHIP NAME] after the military leave is over.

Reinstatement

Unless circumstances at [TOWNSHIP NAME] change so drastically while the employee is on annual or active duty military leave that reinstatement is impossible or impractical, when the employee returns to [TOWNSHIP NAME] after military leave, the employee will either be reinstated to the position the employee held before taking military leave or be given a similar position with the same seniority, status, and pay, if in either case the following conditions are met:

- Proof of honorable discharge from duty.
- Proof of ability to resume the position.
- Notice of intention to return is given.

If the employee is unable to return to the same position after annual or active duty military leave, [TOWNSHIP NAME] will arrange for another position at the same seniority, status and pay.

Notice of intention to return to work must reach [TOWNSHIP NAME] within [number] days of the employee's discharge from military duty.

Annual Vacation Leave

Annual military leave of absence is in addition to any annual vacation leave the employee is entitled to. [TOWNSHIP NAME] will not make deductions from annual vacation leave for time spent on annual military leave.

Nondiscrimination

[TOWNSHIP NAME] makes it a policy not to discriminate in any way against employees who are members of the military. The employee's job will not be in jeopardy if a military leave of absence is requested or taken. In addition, the employee will not be discharged by [TOWNSHIP NAME] for one year after returning from military leave without just cause.

[TOWNSHIP]

EMPLOYEE HANDBOOK

Personal Leave Policy

A personal leave of absence without pay may be granted an employee at the discretion of the Township. A personal leave of absence is defined as an absence of two weeks or longer. It is not our general policy to grant personal leaves of absence and such leaves will be granted only under unusual circumstances. A personal leave of absence instead of medical leave is not available.

Granting of such a leave depends on the review of the merits of each case, including the effect the employee's absence will have on the workload of the other employees. Probationary employees are not generally eligible for leaves of absence. An employee must have one year of continuous employment before such a leave will be considered.

Applications for leaves of absence may be granted or rejected as dictated by the judgment of [TITLE OF PERSON WHO APPROVES REQUESTS].

Salary and benefits are not payable to an employee while the employee is on a personal leave of absence, with the exception of Township-paid term life insurance that is continued for eligible employees for one year of a leave of absence. Health insurance may be continued if the employee pays the full premium at the group rate. Although employees do not accrue benefits while on leave, those benefits accrued up to the time the employee started the leave will be retained.

The employee's exact position, tour of duty, or work area may not be guaranteed upon return from a personal leave of absence; however, all efforts will be made to place the employee in the first available similar job with similar pay.

It is the employee's responsibility to return to work on the date the leave of absence expires. Should the employee fail to return and fail to notify [TITLE OF PERSON WHO SHOULD RECEIVE REQUESTS] of a request for an extension, we will assume that the employee does not intend to rejoin the Township and will consider the employee to have resigned from employment. A request for extension of a leave of absence must be in writing and must be received at least five working days prior to the expiration of a leave.

[TOWNSHIP]

EMPLOYEE HANDBOOK

Sick Leave

[TOWNSHIP NAME] provides payment of income (sick leave) for eligible employees when that employee is away from work due to illness. Employees will be eligible for sick leave after completion of 90 calendar days of service, and if the work at least thirty (30) hours per week. Sick leave is payable the same as the employee's regular salary, and is subject to the same withholding elections.

Sick leave will be accrued at the rate of a half (1/2) day for each month of service for eligible employees. The balance of unused, but accrued, sick leave days will be carried forward from one year to the next, up to a maximum of 30 days. All sick leave used by employees will be charged against the employee's total sick leave balance. Employees eligible for retirement from [TOWNSHIP NAME] will be paid for all accrued, but unused, sick leave if the total is greater than 25 days.

Any employee that is out on sick leave longer than two days, must return to work with a doctor's certificate stating the nature of the illness and the employee's fitness to return to duty.

If an employee is unable to work due to illness, the employee must notify his immediate department head as soon as possible after the onset of the illness, and certainly by the time the employee was to report to work. It is not permissible to be gainfully employed elsewhere while out on sick leave. Any employee doing so will be considered to have voluntarily quit without notice and to not be in good standing at the time of resignation. Sick leave may be taken in hourly increments for non-exempt employees, while exempt employees will be charged for sick leave for full day absences only, as exempt employees are not paid for overtime.

[TOWNSHIP NAME] permits use of available sick leave for use during absence due to the birth or adoption of a child to an employee. The sick leave will be in addition to other available time (see Maternity section).

Industrial accidents and illness are covered by Worker's Compensation Insurance pursuant to the requirements of the laws in the various states in which [TOWNSHIP NAME] operates. The sick leave policy outlined above does not apply to those illnesses or injuries that are covered by an applicable worker's compensation policy.

[TOWNSHIP]
EMPLOYEE HANDBOOK

Time Off to Vote

It is the policy of [TOWNSHIP NAME] to give employees time off to vote.

Advance Request

Before taking time off to vote, the employee must make a written request for time off [number of days of advance notice] days before voting day.

Paid Absence

Time off to vote will be treated as a paid absence.

Voting Hours

The employee is allowed [number of hours] hours of time off to vote. Time off to vote is granted if the polls open fewer than [number of hours] hours prior to work starting time or close fewer than [number of hours] hours after quitting time. Time off to vote may be taken before coming in to work or at the end of the workday.

Covered Elections

This time off to vote policy applies to [types of elections—e.g., federal, state, local] elections.