**{Company Logo}**

**{Company Name}**

**EMPLOYEE HANDBOOK**

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**{COMPANY NAME}**

**EMPLOYEE HANDBOOK**

**Welcome to {Company’s Name} Team**

{Company name} is looking forward to having you join our great team! We are excited about the contribution you will make to {Company name.. We hope your position with {Company name} will be a great opportunity for personal and professional growth.

It is important that you thoroughly read this Employee Handbook to learn about our policies and what you can expect as an employee with {Company name}. The purpose of the Employee Handbook is to:

* Provide guidelines for employees to represent {Company name] in an ethical and responsible manner;
* Outline benefits and expectations between {Company name} and its employees;

Our relationship with employees is a partnership. This Employee Handbook outlines {Company name} expectations of you and what you can expect from us. Working together as partners, we hope that you realize your individual goals and enjoy working for {Company name}.

**Note:** This Employee Handbook is not intended to create a contract of employment and does not change or modify the specific terms of your employment letter of offer/employment contract. It is intended to describe {Company name} policies. These policies may be revised from time to time due to legislative or business changes; and you will be notified of the changes.

1. **Mission, Values and Culture**

Our mission, values and culture communicate what we stand for and what we want to achieve for our employees, customers and our community. The policies within the Handbook are the framework that supports us in fulfilling our mission, living our values and having a culture where employees thrive and {Company name} is successful.

**Our Mission is:**

 **{Insert Mission}**

**Our Values are:**

**{Insert Values}**

**Our Culture:**

**{Insert information on culture}**

1. **Company History**

**{Insert history}**

1. **Structure for the Employee Handbook**

The Employee Handbook is divided into the following sections:

Part I: General Business Policies: these policies outline your responsibilities to ensure that {Company name} work environment is positive, safe and healthy for all employees.

Part II: Human Resources & Employment Policies: communicates the rights and obligations of employees and {Company name}.

We wish you every success in your position with {Company name}.

Sincerely,

{Owner/President}

**PART I General Company Policies**

* 1. Code of Conduct
	2. Confidential Information, Intellectual Property & Information Technology (I.T.)
	3. Conflict of Interest
	4. Handheld Devices While Driving
	5. Health & Safety
	6. Inclusion and Accessibility for Individual with Disabilities
	7. Impairment Prevention in the Workplace
	8. No Smoking
	9. Prevention of Violence & Harassment in the Workplace
	10. Reporting Gross Misconduct
	11. Use of {Company Name} Property/Equipment
	12. Work Alone Procedures
	13. **Code of Conduct**
1. **Management Accountabilities**

Integrity: we operate the business with the highest ethical standards and treat all employees fairly and with respect. {Company name} promotes business and human resources practices that positively impact our employees, our community and the environment.

Leadership: management will be a role model by:

1. Following the Code of Conduct,
2. Communicating and reinforcing the importance of employees adhering to the Code of Conduct,
3. Investigating violations immediately.

Management is responsible for providing employees with training and implementing practices that promote teamwork. It is management’s role to objectively and fairly evaluate performance; develop training and learning goals for employees; and promote a continuous learning environment.

Diverse and engaged team: {Company name} values the diversity in the backgrounds, skills, strengths and perspectives that employees bring to the business. We foster a work environment which enables employees to take pride in their work and in providing the highest level of service to our customers.

Employment Practices:{Company name} strives to provide accessibility in the workplace for individuals with disabilities by making its employment practices accessible.

Good corporate citizen: our objective is to be actively involved in the community we work in. Our intent is to help to improve the quality of life for others by being socially and environmentally responsible.

Safety: {Company name} is committed to providing a safe and secure work environment to prevent injuries. Management will follow and enforce our health and safety policies and regulations.

1. **Employee Accountabilities**

Code of Conduct Compliance: our employees are expected to fully comply with the Code of Conduct and other policies within the Employee Handbook.

Job expectation: employees are expected to come to work ‘Fit for Work’ and fulfill their job obligations to the best of their abilities. We expect you to have good attendance and work the hours specified by your supervisor/manager.

Employees will be courteous and maintain a positive attitude when interacting with customers, the public and fellow employees. It is expected that you will act in a professional manner which includes refraining from swearing, demonstrating a negative attitude or acting in anyway that does not represent {Company name} in a businesslike manner;

The quality of our employees’ work leads to customer satisfaction, long lasting customer relationships and a competitive advantage. Employees are required to follow job instructions and project specifications to fulfill {Company name} commitments to our customers.

Respect the rights of all individuals: discrimination or harassment, of any kind, with regard to race, ancestry, colour, citizenship, ethnic origin, place of origin, creed, disability, family status, marital status, gender identity, gender expression, sex or sexual orientation is prohibited. {Company name} expects all employees to treat customers, the public, other employers and management with dignity and respect;

Safety: {Company name} is committed to providing a safe and secure work environment to prevent injuries. Each employee must assume personal responsibility for complying with {Company name} health and safety policies and regulations;

Use of company property/equipment: employees are responsible to use company property or equipment in a safe manner; and also to safeguard the use of property or equipment from unauthorized or inappropriate use or destruction. Equipment and vehicles must be maintained and kept clean, inside and out, including the removal of litter/garbage and personal belongings. Tools and supplies must be well stored, maintained, used and operated in a safe manner.

* 1. **Confidential Information, Intellectual Property & Information Technology (I.T.)**
1. **Confidential Information:**

As our employee, you may come into contact with confidential information and we expect that you keep this information confidential. The following are examples of confidential information:

* Customers and suppliers’ contact and pricing information;
* Financial statements and business plans;
* {Company name} pricing policies and pricing statistics;
* Commercial activities, product development and future plan.

Any confidential information obtained during employment with {Company name} cannot be used for personal gain or within another enterprise.

1. **Intellectual Property:**

All intellectual property, such as trademarks, copyrights and patents; and any work you created in the course of your employment is the property of {Company name}. All source material used in presentations or written documents must be acknowledged.

1. **Information Technology (I.T.) Usage, Storage and Security:**

Use of any storage devices (i.e. USB’s, external back-up drives, cloud, CDs, etc.) and their contents are the property of {Company name}. Furthermore, it is understood, that you will use company equipment for company business, only during working hours, unless approved by management.

Downloading of personal material on company I.T. equipment/mobile devices is prohibited.

Computers/mobile devices can not be used for knowingly transmitting, retrieving or storing any communication that is:

* Considered to be discriminatory, offensive or harassing;
* Insulting, threatening or offensive to any individual or group;
* Obscene, sexually explicit, profane or pornographic;
* Fraudulent;
* In violation of any licence governing the use of software;
* Engaged in any purpose that would be considered a criminal or civil offence.

If it is proven that you have abused our technology systems, equipment, data and/or privilege of access to email, Internet or other I.T. services, you will be subject to disciplinary action. This action could include progressive discipline, termination of employment or legal action depending of the severity of the infraction.

* 1. **Conflict of Interest**

There are two types of conflict of interest that are covered under this policy. The first type occurs when your personal interest could be or appears to be in conflict with {Company’s name} business interests. It is important that you avoid activities or relationships that are in conflict with our business while on customer locations or using {Company name} information or property. It is prohibited for you to compete with {Company name} while in our employ.

The second conflict of interest covered under this policy is the employment of relatives, spouses or partners who work in the same department. If you are a supervisor or manager, you cannot directly manage a relative, spouse or partner. When this situation arises, let your manager know so that appropriate action can be taken.

Also, when a conflict or potential conflict of interest arises between employees, it may be necessary to reassign other employees or yourself to another department or work area.

* 1. **Handheld Devices While Driving**

It is paramount that your focus is on safely operating company vehicles/machinery to minimize the possibility of accidents. {Company name} will not allow texting or talking on a handheld device, during business hours, while operating a company vehicle/machinery or while conducting company business. This includes but is not limited to answering or making phone calls, engaging in phone conversations, reading or responding to emails/texts or surfing the Internet. Handheld refers to any wireless device that is used to communicate information via calls, texts or the Internet. We expect that you:

* Turn your handheld off or put it on silent or vibrate before starting the vehicle;
* A hands-free device (i.e. Bluetooth) can be used only to turn it on and off;
* Pull over to the side of the road, in a safe area, when making a phone call, creating or responding to emails/texts or listening to messages on voice mail;
* When answering calls, you will pull over to a safe area. If that’s not possible let the call go to voicemail;
* Only employees can use company handheld devices unless its an emergency;
* If you refuse to answer your handheld or participate in a conference call while driving, there will be no reprisal;
* Company handheld devices are to be used for company business. If you use it for personal use, you will be held responsible for the cost of personal usage.

If you choose to violate this policy, you will face disciplinary action which could include progressive discipline, termination of employment or legal action depending on the severity of the infraction. There could be the possibility of facing legal consequences if in the course of fulfilling your job duties, you are involved in a car accident and the evidence shows you were distracted because of using your handheld. There could also be legal ramification for {Company name} if this occurs. Employees who are charged with traffic violations resulting from use of a handheld while driving, will be solely responsible for the liabilities and costs that result from such actions.

* 1. **Health & Safety**

{Company name} considers the health and safety of our employees to be of primary importance.

Our objective is to conduct business in the safest possible manner consistent with the Occupational Health & Safety Act’s (OHSA) regulations. The management of {Company name} is committed to continuous improvement towards an accident-free workplace through effective health & safety procedures, education and training.

Accidental loss can be controlled by good management in combination with active employee involvement. At {Company name}, safety is the direct responsibility of managers, supervisors and employees. You play a big part by doing your job safely and wearing personal protective clothing and devices to prevent accidents. The following are your responsibilities:

* Fully comply with OHSA’s regulations and {Company name} health & safety policies and procedures;
* Report immediately any personal injury, however minor;
* Wear personal protective clothing and devices at all times; and report any missing or defective protective equipment immediately to your supervisor/manager;
* Report any observed hazards or risks immediately to your supervisor/manager;
* Cease to operate any equipment, machinery or device which is defective or may endanger self or others;
* Refrain from any ‘horse play’ which OHSA defines as ‘any prank, contest, feat of strength, unnecessary running or rough and boisterous conduct’;
* Attend required health & safety training and apply knowledge in carrying out your job duties.

**Indepth training and instruction on Health & Safety procedures will be provided by your supervisor/manager.**

Disregard or wilful violation of this policy by employees, at any level, will be considered cause for disciplinary action in accordance with the ‘Progressive Disciplinary Policy’.

* 1. **Inclusion and Accessibility for Individuals with Disabilities**

{Company name} is committed to an inclusive work environment where employees are treated with dignity, independence, integration and equal opportunity. Our employment practices are accessible to meet the needs of employees and candidates with disabilities by providing reasonable accommodation in a timely manner. We are committed to fulfilling our requirements under the ‘Accessibility for Ontarians with Disability Act’.

* 1. **Impairment Prevention in the Workplace**

{Company name} expects that all employees will ***report ‘fit for work’ - come to work in a physical and mental state that allows them to perform their duties safely***, with good judgement and to required standards.

Storage or use of alcoholic beverages, illegal drugs or recreational cannabis on the company’s worksite; in company vehicles; or off-site work locations is strictly prohibited.

Distribution, sale or transfer of alcohol, illegal drugs, prescriptive drugs/cannabis or recreational cannabis is strictly prohibited on company worksite; company vehicles; or off-site work locations.

The following are important definitions for you to understand to comply with this policy:

1. **Fit for Work:** employees are required to come to work in physical and mental condition to effectively and safely perform their job duties without impairment due to the use of or after-effects of alcohol, illegal drugs, recreational cannabis or medically prescriptive medication/cannabis.
2. **Impairment:** The Canadian Human Rights Commission defines impairment at work as ‘diminished ability to fulfill or remain focused on a task’ and the appearance of impairment at work as ‘odour of alcohol or drugs, glassy or red eyes, unsteady gait, slurring or poor coordination’.
3. **Safety Sensitive Positions:** are ones which if not performed in a safe manner, can cause direct and significant damage to property, and/or injury to the employee, others around them, the public and/or the immediate environment.

The following are your responsibilities to comply with this policy:

* Report ‘Fit for Work’ for all scheduled shifts and remain ‘Fit for Work’ while on company property, in company vehicles, conducting company business or working on off-site locations;
* Use medically prescribed medication (drug or cannabis) responsibly to ensure safe performance of duties. Report any necessity for modified work or accommodation to management, particularly in safety-sensitive positions;
* Use, distribution or possession of illegal drugs, recreational cannabis or alcohol on company property, company vehicles or off-site work locations is strictly prohibited;
* Notify management immediately if a co-worker appears unfit for work or is working in an unsafe manner;
* Take personal responsibility to seek advice if concerned about substance use and follow prescribed treatment;
* Speak confidentially to management if you have a substance dependency or emerging alcohol, drug or cannabis problem that can affect you doing your job safely. {Company name} will provide confidential and appropriate accommodation to employees when a disability due to substance use/dependency is confirmed.
	1. **No Smoking**

Smoking, vaping or use of e-cigarettes is prohibited in an enclosed workplace, enclosed motorized vehicle or job site trailers. Once you are on company property, there is no smoking, vaping or use of e-cigarettes unless you receive permission from your supervisor/manager to take an unpaid break in a designated areas. Smoking, vaping or use of e-cigarettes can only occur on your assigned breaks and in designated areas.

* 1. **Prevention of Violence & Harassment in the Workplace**

Workplace violence, harassment or sexual harassment will not be tolerated from any person including management, employees, customers, vendors or members of the public on its premises or off-site locations.

Everyone within {Company name} including the owner, managers, supervisors and employees are expected to work together and to adhere to this policy.

In the case of witnessing or being the victim of a potential or actual workplace violence, you will immediately contact your supervisor/manager or an emergency number {indicate where the emergency numbers are posted} if your supervisor/manager is not available. All physical or sexual assaults occurring on company property will be reported to the police.

You are to immediately inform your supervisor/manager of a complaint, potential incident or actual incident of harassment or sexual harassment. If your supervisor/manager is the harasser, you are to contact {name of person and contact information}. If the owner/president is the harasser, you are to contact {name of person and contact information}.

All complaints, potential or actual incidents of workplace violence, harassment or sexual harassment will be investigated immediately in a fair and respectful manner. Information provided about an incident or complaint is confidential and will not be disclosed except as necessary to protect employees, to investigate the complaint or incident, to take corrective action or as otherwise required by law.

***Indepth training on dealing with incidents of violence, harassment or sexual harassment will be provided by your supervisor/manager.***

Depending on the severity of the proven offence, corrective action will be taken which could include progressive discipline, termination of employment or legal action.

The following definitions are important for you to understand to comply with this policy:

1. **Workplace Violence:**
* Using physical force against an employee that causes or could cause physical injury;
* Making an attempt to exercise physical injury to an employee;
* Making a statement or taking an action that an employee can reasonably interpret as a threat to use physical force that could cause physical injury.
1. **Workplace Harassment:**
* Engaging in unwelcome words or actions against an employee that are known or should be known to be offensive, embarrassing, humiliating or demeaning (i.e. sexual, psychological, personal);
* Engaging in behaviour that intimidates, isolates or discriminates against an employee in the workplace;
* Bullying is a form of workplace harassment and is demonstrated by:
	+ Engaging in acts or verbal comments that could ‘mentally’ hurt or isolate an employee in the workplace,
	+ Engaging in repeated actions or pattern of behaviours that are intended to intimidate, offend, degrade or humiliate an employee or group of employees,
	+ Asserting power through aggression in the workplace.
1. **Workplace Sexual Harrassment:**
* Engaging in words or actions against an employee because of sex, sexual orientation, gender identity or gender expression where the comments or actions are known or ought to reasonably be known to be unwelcome;
* Making a sexual solicitation or advancement to an employee where the individual knows or ought to reasonably know the solicitation or advance is unwelcome.
1. **Domestic Violence:**
* Situations where a person who has a personal relationship with an employee (i.e. a spouse or former spouse, current or former intimate partner or a family member) who may physically harm or attempt or threaten to physically harm an employee at work.

**The following are examples of unacceptable behaviours in our workplace:**

**Violence:**

* Verbally threatening to attack an employee;
* Leaving threatening notes or sending threatening emails;
* Shaking a fist in an employee’s face;
* Wielding a weapon;
* Hitting or trying to hit an employee;
* Throwing an object at an employee;
* Sexual violence against an employee;
* Kicking on object an employee is standing on (i.e. ladder);
* Trying to run down an employee using a vehicle or equipment (i.e. fork lift truck).

**Workplace Harassment:**

* Offensive or intimidating comments or jokes that demean, ridicule, intimidate or offend;
* Aggressive behaviour;
* Displaying or circulating offensive pictures or material in print or electronic form;
* Repeated offensive or intimidating phone calls, email or texts;
* Inappropriate staring;
* Bullying.

**Workplace Sexual Harassment:**

* Asking questions, talking or writing about sexual activities;
* Rough or vulgar humour or language related to sexuality, sexual orientation or gender;
* Displaying or circulating pornography, sexual images or offensive sexual jokes in print or electronic form;
* Leering or inappropriate staring;
* Invading personal space;
* Unnecessary physical contact, including inappropriate touching;
* Demanding hugs, dates or sexual favours;
* Making gender-related comments about someone’s physical characteristics or mannerisms;
* Verbally abusing, threatening or taunting an employee based on sexual orientation;
* Threatening to penalize an employee if the employee does not give sexual favours.
	1. **Protection of Reporting Gross Misconduct**

{Company name} encourages you to report any concerns or suspicions of misconduct in the workplace or on job sites. All reported incidents will be handled confidentially and thoroughly investigated. You need to be aware that, if a suspicion is reported and results in disciplinary or legal action, your involvement as a witness may be necessary, unless other substantial evidence is available.

If you witness a suspicious or improper activity, contact your immediate supervisor/manager. If it is suspected that the supervisor/manager is acting improperly, contact {state name and department}.

Examples of gross misconduct are:

* Theft or inappropriate removal or possession of company property;
* Falsification of timekeeping record;
* Working under the influence of alcohol, recreational cannabis or illegal drugs;
* Possession, distribution, sale or transfer of alcohol, recreational cannabis or illegal drugs, while on duty or while operating employer-owned vehicle or equipment;
* Fighting or threatening violence in the workplace or worksites;
* Negligence or improper conduct leading to damage of employer-owned or customer-owned property;
* Violation of health & safety regulations;
* Sexual or unwelcome harassment;
* Possession of dangerous or unauthorized materials i.e. firearms, explosives, etc. in the workplace or on worksites;
* Unauthorized disclosure of business proprietary or confidential information.

It is expected that when reporting gross misconduct, employees will act in good faith and report concerns they feel are significant and true. Unfounded allegations that are proven to have been made recklessly, maliciously or with foreknowledge that they are false will result in disciplinary action.

Retaliation against persons reporting concerns in good faith is prohibited. Any individual reporting possible violations in good faith will not experience abuse, harassment, threats, discrimination or adverse employment consequences as a result. Any person found guilty of retaliation will face disciplinary action up to and including termination of employment.

* 1. **Use of {Company Name} Property/Equipment**

As an employee, you are expected to respect {Company name} physical property, equipment, vehicles and resources. Company equipment, vehicles, materials, tools, uniforms, personal protective equipment (PPE), etc. are only to be used when doing your job. You are expected to perform your duties in a competent and safe manner when using {Company name} property/equipment/vehicles.

1. **Company Property:**
* Under no circumstances will company property be removed from the company’s premises or designated storage areas without the permission of a supervisor/manager;
* An investigation will be conducted if it is alleged that an employee has removed company property without permission. If after the investigation, it is found that an employee has removed company property without permission, the supervisor/manager will initiate the progressive disciplinary process;
* It is deemed a cause for disciplinary action up to and including termination of employment if an employee causes damage to company property, equipment or a vehicle in a deliberate manner due to negligence or recklessness. There may be financial repercussion to the employee dependent upon the extent of the damage.
1. **Tools and Supplies; Uniforms; and Personal Protective Equipment (PPE):**
* The {Company name} pays for tools, supplies, uniforms and PPE used by employees on the job;
* All resources purchased by {Company name} remain the property of the company;
* It is expected you will properly maintain and safeguard assigned tools, supplies, uniforms and PPE;
* If tools, equipment or PPE are lost, stolen or damaged through negligence, management will initiate the progressive disciplinary process;
* If you leave {Company name} for any reason, we expects tools, supplies, uniforms, PPE, etc. to be returned. If they are not returned, you may have their value deducted from your last pay cheque.
	1. **Working Alone**

There are times that your job may require you to work alone. We take every reasonable precaution to reduce injury or illness due to hazards because of working alone. Contact lists can be found {state location of contact lists} and you can reach your supervisor/manager {state mode of contact} in case of an emergency. When working alone, immediately report any issues or hazards to your supervisor/manager.

It’s crucial, for your safety, to follow instructions you receive from your supervisor/manager and in health & safety training when working alone.

**You will receive indepth training on the procedures for working alone if it is a requirement of your job.**

**PART II Human Resources & Employment Policies**

1. **Human Resources Policies**
	1. Recruitment & Selection
	2. Probationary Period
	3. Orientation
	4. Employee Development
	5. Performance Management
	6. Progressive Discipline & Termination
2. **Employment Policies**
	1. Terms of Employment
	2. Compensation, Overtime Payments & Benefits
	3. Working Hours
	4. Paid and Unpaid Time
3. **Human Resources Policies**
	1. **Recruitment & Selection**
4. **Internal Recruiting:**

Whenever possible, a newly open or created position will be offered first to employees before the position is posted externally.

1. **External Recruiting:**

Our best source of candidates are the ones recommended by our employees as you know the business and what type of individual fits into our company. Recommend anyone you feel is suited for the positions within our company. {Include information on Employee Referral Program if applicable}

* 1. **Probationary Period**
1. **Full-time Positions:**

Your first three months are considered a probationary period with {Company name}. Your supervisor/manager will oversee your on-the-job training. Feel comfortable to discuss any training or support you need with your supervisor/manager. After three-months, you supervisor/manager will provide you with performance feedback. If the feedback is satisfactory you will be offered a full-time position with {Company name}.

1. **Seasonal or Part-time Positions:** {insert length of probationary period}.
	1. **Orientation**

We provide new employees with orientation so they can learn about our company culture; policies and procedures; and job expectations. It is expected that you fully participate in the orientation process and complete all required training and instruction given by the management team.

* 1. **Employee Development**

We place a high value on employee growth and development and give our employees the training, information and education they need to be successful. We hope that if we invest in you our business will continue to thrive.

{Company name} will pay the full cost of any in-house training and development programs that you require to perform your job, or when it is considered necessary to improve performance. Requests for training should be forwarded to your supervisor/manager for approval.

{Include any prerequisites and reimbursement for taking external courses or training, travel and books}

* 1. **Performance Review Process**

We believe it’s important to formally assess your performance whether you are a full-time, part-time or seasonal employee. In the performance review, you will receive feedback on how well you’re performing your job; fitting in with your team; and satisfying our customers. Our performance review process is a time when your supervisor/manager and you set new goals and areas of development so you can continually grow in your job. Once you have successfully completed your probationary period, your supervisor/manager will review our performance review process with you.

* 1. **Progressive Discipline & Termination**

{Company name} provides you a fair and equitable opportunity to achieve your job expectations and comply with company policy. We encourage you to exercise self-discipline at all times in your conduct and performance.

When work performance or conduct is unsatisfactory and/or a company policy is not observed, your supervisor/manager will initiate the following progressive disciplinary process:

1. Verbal Warning: a verbal warning is issued if an incident occurs that contravenes one of our policies, your behaviour does not meet the standards of the Code of Conduct or you are not satisfactorily performing your job. Your supervisor/manager will discuss the issues with you and together you will develop a Corrective Action Plan to improve your performance;
2. Written Warning: if your performance or conduct does not improve or an issue of a serious nature occurs, a written letter of warning will be issued. You will be given the opportunity to rectify the situation, within a reasonable period of time, as agreed upon with your supervisor/manager;
3. Termination: if your performance or conduct has not improved, your employment with {Company name} can be terminated.
4. **Employment Policies**
	1. **Terms of Employment**

When you accepted the position with {Company name}, you received an employment letter of offer or a contract which outlined the terms of your employment. If there are any concerns, please discuss them with your supervisor/manager.

* 1. **Compensation, Overtime & Benefits**
1. **Determining Compensation:**

Salaries and hourly rates within {Company name} are determined by the type of work performed and the value of the job to the company. Salary and hourly rates policies are regularly reviewed and assessed based on the assigned work classification, years of service, internal equity, the company’s performance, current economic conditions, performance of the employee and the value of the job.

{Add information on how your company determines compensation}

1. **Payment of Compensation:**

Employees are paid on a {weekly, bi-weekly, etc.} basis and the net pay will be deposited into your bank account {if applicable}. Net pay is determined by deducting income tax, EI and CPP from the gross pay (total hours worked x hourly rate).

{Add information relevant to your company}

1. **Overtime Payment:**

All employees except those who fall under the ‘Landscape Gardener Exemption’ are eligible to overtime pay after working forty-four hours in a regularly scheduled pay period. Employees are entitled to one and a half time their regular rate of pay. Employees who fall under the ‘Landscape Gardener Exemption’ are not eligible for overtime pay.

{If your company has ‘Banking Hours Policy’ include the following information} {Company name} and the employee can agree in writing that the employee will receive paid time off work instead of overtime pay as banked hours or lieu time hours. If an employee has agreed to bank overtime/lieu time, the employee will be given one and a half hours of paid time off work for each hour of overtime worked.

1. **Employee Benefit Plan:**

**{Include detail of Benefit Plan}**

* 1. **Working Hours**
1. **Salaried Employees:**

Hours of work including starting and ending time, breaks and lunch are defined in your employment letter of offer or employment contract and are based on the requirements of the job.

1. **Hourly Employees:**

Hours of Work: the standard hours of work are eight hours per day or forty-eight hours per week. Due to the seasonal nature of the business and the effects of weather, working hours can vary. {add information about your hours of work }.

Rest and Meal Periods: during an eight-hour working day, an employee will receive a thirty-minute meal break (unpaid) and two fifteen-minute paid breaks.

Reporting Time Worked: {state how employees report their hours worked}

Inclement Weather: it is the employee’s responsibility to check with management, if weather could affect ability to work, before coming into work. Your supervisor/manager will advise you whether or not to report to work.

1. **Three-Hour Rule:**

If you regularly work more than three hours a day and come into work but work less than three hours, despite being available to work longer, you will be paid for three hours equal to the greater of the following:

* The sum of:
	+ The amount you earned for the time worked or,
	+ Wages equal to your regular rate for the remainder of the time; or
* Wages equal to your regular rate for three hours work.

{Company name} is not be required to pay for a cancelled shift in the following circumstances:

* Fire, lightning, power failure, storms or similar causes beyond {Company name} control, or
* The employee’s work is weather dependent and {Company name} is unable to provide work for weather-related reason.
1. **Punctuality:**

We expect that you will report to work at your scheduled time. If you encounter a difficulty that will make you late, notify your supervisor/manager immediately.

* 1. **Paid and Unpaid Time Off**
1. **Bereavement Leave:**

We support you in the case of a death of an immediate family member by giving you two unpaid bereavement days in each calendar year once you have completed two consecutive weeks of employment. If there are any extenuating circumstances please discuss them with your supervisor/manager. Notify your supervisor/manager as soon as possible when taking bereavement leave.

\*For the purpose of this policy, immediate family members refers to father, mother, brother, sister, spouse, same sex partner, child, parent-in-law, son/daughter-in-law, grandchildren, grandparents, sister/brother-in-law or any other relative by blood or marriage residing with the employee.

1. **Crime-Related Child Death and Disappearance Leave:**

Once you have been employed for at least six consecutive months, you are entitled to up to one hundred- and four-weeks unpaid leave if your child has disappeared as a result of a crime. If your child dies as a result of a crime you are entitled to up to one hundred and four weeks of unpaid leave. Request for leave must be provided to your supervisor/manager in writing.

1. **Critically Ill Leave:**

If you have been employed for at least six consecutive months, you will be entitled to take seventeen weeks in a fifty-two-week period of unpaid leave, to provide care for a critically ill adult who is a family member; and up the thirty-seven weeks unpaid leave to care or support a critically ill child who is a family member. You must provide a certificate issued by a qualified medical practitioner stating that the family member, adult or child, is critically ill. Request for leave must be provided to your supervisor/manager in writing.

1. **Death of a Child Leave:**

Employees who have been employed for at least six consecutive months are entitled to up to one hundred and four-weeks unpaid leave for the death of a child. Your supervisor/manager needs to be informed in writing, as soon as possible, that you will be taking leave.

1. **Domestic or Sexual Violence Leave:**

Employees who have been employed for at least thirteen consecutive weeks are entitled to domestic or sexual violence leave if the employee or employee’s child has experienced or been threatened with domestic or sexual violence. The leave can be taken for any of the following reasons:

* To seek medical attention for the employee or child of the employee because of a physical or psychological injury or disability caused by the domestic or sexual violence;
* To access services from a victim services organization for the employee or child of the employee;
* To have psychological or other professional counselling for the employee or child of the employee;
* To move temporarily or permanently;
* To seek legal or law enforcement assistance. This can also include time required to make a police report or preparation for presenting a case in family, civil or criminal court.

You are eligible to ten days of leave every calendar year. The first five days are paid leave and the last five days are unpaid leave. The ten days do not have to be taken consecutively and cannot be carried over into the next calendar year. You are also entitled to take up to fifteen weeks unpaid leave within a calendar year. Please notify your supervisor/manager in writing, as soon as possible, that you will be taking the leave.

1. **Family Caregiver Leave:**

Employees are entitled to take up to eight weeks of unpaid leave, in each calendar year, to provide care and support to a family member. Employees are not required to take the leave in complete weeks.

‘Family member’ is defined as:

* Employee’s spouse (including same sex partner);
* A parent, step-parent or foster parent of the employee or employee’s spouse;
* A child, step-child or foster child of the employee or the employee’s spouse;
* A grandparent, step-grandparent, grandchild or step-grandchild of the employee or the employee’s spouse;
* The spouse of a child of the employee;
* The employee’s brother or sister;
* A relative of the employee who is dependent on the employee for care or assistance;
* Any individual prescribed as a family member.

You must request the leave from your supervisor/manager in writing.

1. **Family Medical Leave:**

All employees are entitled to family medical unpaid medical leave of up to twenty-eight weeks in a fifty-two-week period. The leave can be used to provide psychological or emotional support; arrange for care by a third-party provider; or directly provide or participate in the care of a family member.

‘Family member’ is defined as:

* Employee's spouse (including same-sex spouse);
* Parent, step-parent or foster parent of the employee or the employee's spouse;
* Child, step-child or foster child of the employee or the employee's spouse;
* Brother, step-brother, sister, or step-sister of the employee;
* Grandparent or step-grandparent of the employee or of the employee's spouse;
* Grandchild or step-grandchild of the employee or of the employee's spouse;
* Brother-in-law, step-brother-in-law, sister-in-law or step-sister-in-law of the employee;
* Son-in-law or daughter-in-law of the employee or of the employee's spouse;
* Uncle or aunt of the employee or of the employee's spouse;
* Nephew or niece of the employee or of the employee's spouse;
* Spouse of the employee's grandchild, uncle, aunt, nephew or niece;
* Person who considers the employee to be like a family member.

You must request the leave from your supervisor/manager in writing.

1. **Jury Duty:**

An employee may be called on for jury duty that falls during working hours. {Company name} will grant {state whether paid or unpaid} leave to attend to jury duties. If the court dismisses the jury early, you are expected to return to work as soon as possible to complete the regular work shift.

1. **Maternity Leave:**

After having completed thirteen weeks of consecutive employment, an employee who takes maternity leave will receive a maximum of sixty-one weeks of unpaid leave in a seventy-eight-week period.

A special term of leave for unexpected illness related to the pregnancy may be taken before the expected date of birth but is still counted toward the general entitlement to maternity leave.

The same leave period applies when an employee is adopting a child. Documentation must be provided confirming the adoption and date of arrival of the child.

Employees employed for at least thirteen consecutive weeks and who have suffered a miscarriage or stillbirth are entitled to twelve weeks of unpaid leave after the miscarriage or stillbirth even if they have already used their entire original leave entitlement.

The employee must give two weeks’ written notice to management identifying the date the leave will begin.

1. **Organ Donor Leave:**

An employee is entitled to organ donor leave whether the employee works a full-time, part-time, seasonal or contract. The employee must be employed for at least thirteen consecutive weeks to qualify for the leave. The employee can take up to thirteen weeks unpaid leave. The leave can be extended to a maximum total time of twenty-six weeks if a legally qualified medical practitioner issues a certificate stating that the employee is not ready to return to work and perform the required job duties. The employee must provide {Company name} with at least two week’s written notice before beginning or extending the leave, if possible. A medical certificate confirming that the employee has undergone or will undergo surgery to donate an organ is required from a legally qualified medical practitioner.

1. **Parental Leave:**

After completing thirteen weeks of consecutive employment, birth mothers who did not take maternity leave and all other new parents are eligible for up to sixty-three weeks unpaid leave for purposes of child care. Either the mother or father is entitled to the leave. The employee must give two weeks’ written notice identifying the date the leave will begin.

1. **Personal Leave:**

If you have been employed for two consecutive weeks, you can receive three unpaid days for personal illness, injury or medical emergency; two unpaid days for bereavement; and three unpaid days for family responsibilities in a calendar year. If you take part of day for leave, it is deemed as a whole working day.

 {Include the following if applicable} When you take a leave day it is deemed a ‘personal leave day’ as well as a leave day under your employment contract.

{Company name} can request you to provide evidence reasonable for the circumstances that the leave is entitled including a doctor’s note. Notify your supervisor/manager as soon as possible that you will be taking the leave.

1. **Statutory Holidays:**

**Non-Landscape Gardener Positions:**

Qualified employees can be full-time, part-time, permanent or on term contract. It does not matter how recently they were hired, or how many days they worked before the public holiday.

Employees qualify for the public holiday entitlement unless they:

1. fail without reasonable cause to work all of their last regularly scheduled day of work before the public holiday or all of their first regularly scheduled day of work after the public holiday (this is called the “Last and First Rule”);
or
2. Fail without reasonable cause to work their entire shift on the public holiday if they agreed to or were required to work that day.

**Note:** Non-Landscape Gardener employees who fail to qualify for the public holiday entitlement are still entitled to be paid premium pay for every hour they work on the holiday.

The statutory holidays are:

* New Year’s Day *January 1st*
* Family Day *3rd Monday in February*
* Good Friday *Friday prior to Easter Sunday*
* Victoria Day *Last Monday on/before May 24th*
* Canada Day *July 1st*
* Labour Day *1st Monday of September*
* Thanksgiving Day *2nd Monday of October*
* Christmas Day *December 25th*
* Boxing Day *December 26th*

If the holiday falls on a Saturday or Sunday, either the Friday before or Monday after is observed as the holiday.

**Landscape Gardener Positions:**

Employees who are classified as ‘Landscape Gardeners, do not receive overtime pay on statutory holiday. Please see: <http://www.horttrades.com/defining-landscape-gardener> for further information.

1. **Vacation:**

{Company name} recognizes that employees need a scheduled time away from normal work duties to refresh and re-energize. Anew employee can not take holidays in the first six months of employment, unless a special arrangement has been established in the employment agreement, to accrue vacation days. Vacation time is accrued (earned) on a monthly basis and can only be taken after it is earned.

Vacation pay is calculated at 4% of the employee’s regular pay. An employee is entitled to two weeks’ vacation within one calendar year (January to December). Due to high volume in business, employees are encouraged not to request holidays between {include start month to end month}. You cannot carry over vacation days to the next calendar year.

A request in writing must be submitted to your supervisor/manager a month prior to the desired time for vacation leave. Vacation requests are granted on a first come first serve basis.

At five plus years, you will receive an additional third week paid vacation in each calendar year.

**ACKNOWLEDGEMENT**

**Acknowledgement of Reviewing, Understanding and Receipt of {Company name} Employee Handbook**

The {Company name} Employee Handbook has been prepared for your information and understanding of {Company name} policies and practices of employment and benefits. It is understood that the Employee Handbook is not a contract or guarantee of any type of employment.

As legislation or business requirements change, the Employee Handbook will be updated or supplemental information will be provided. Employees will be notified of any additions or deletions to the Handbook.

Upon completion of your review of the Handbook, please ask your supervisor/manager any questions for clarification. Please read and sign the acknowledgement below and give a copy to your supervisor/manager to put in your employee personnel file.

**Acknowledgment:**

I have received a copy of {Company name} Employee Handbook, read it, asked any questions, understand the information, accept and agree to comply with the information provided in the Employee Handbook. I understand that this Handbook is not intended to cover every situation which arises during my employment, but it is a general guide to {Company name} policies and practices.

I will retain a copy of the Handbook to use as reference during my employment with {Company name}, or until requested to return it.

I will not divulge the contents of the Employee Handbook to anyone outside the company without permission of the President/Owner.

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

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supervisor Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_