

EMPLOYEE ORIENTATION- AR Dept of Veterans Affairs

I have been briefed on and/or received the following written information:

ADVA Mission (ADVAP 1-1)	Disciplinary Rules & Procedures (ADVAP 2-1)	Employee Grievance Procedure (ADVP 2-2)
Time/Leave/Holidays (ADVP 2-3)	Inclement Weather Work Policy (ADVP 2-4)	Fair Labor Standards Act (ADVP 2-5)
Worker's Compensation Claims (ADVP 2-7)	Smoking Policy (ADVP 2-8)	Sexual Harassment (ADVP 2-9)
Catastrophic Leave Bank Program (ADVP 2-14)	Drug Free Workplace (ADVP 2-15)	Family Medical Leave (ADVP 2-16)
Arkansas Whistle Blower's Act (ADVP 2-19)	Anti-Fraud and Code of Ethics (ADVP 2-20)	Internet, Email, & General Computer Use (ADVP 2-22)
Personal Appearance Dress Code (ADVP 2-24)	Employee Assistance Program	Authorization to Obtain Traffic Violations (VSP-2)

HR Personnel: _____ Date: _____ Employee: _____

Information for the following programs has been given to me:

Benefits(Health & Life Insurance)	ASEA & ASEA Dental Plan
AR Diamonds Plan	Arkansas Cafeteria Plan

HR Personnel: _____ Date: _____ Employee: _____

I have been briefed on, received, and completed the following forms:

Disclosure	Selective Service	Request Criminal Background Ck(notarized)
I9	Tax Withholding (Federal & State)	Benefits (Minnesota Life & APERS)
Direct Deposit (voided check)	Internet, Email, & General Computer Use form	HIPPA
Code of Ethics	Confidentiality sheet signed (AASIS only)	Drug free Workplace Acknowledgment
AR Whistle Blower	Disciplinary Rules and Procedures	Orientation Checklist

HR Personnel: _____ Date: _____ Employee: _____

I have been briefed on and understand the following responsibilities:

Specific Duties & Responsibilities	Annual Performance Rating (ADVP 2-17)
Signed Performance Evaluation	Orientation Checklist

Supervisor: _____ Date: _____ Employee: _____

Remarks: (Optional)