

NEW HIRE PACKAGE

On-call or temporary (under 3 months)

**NOTE: Require Director of Administration's
approval first**

Process

Resume, criminal records check and child abuse registry (if applicable) to be attached to this package and submitted to HR Department.

Thank you!



PAYROLL NOTICE – SENT TO FINANCE

Department to Complete

S.I.N.# ___ - ___ - ___ Status # _____

Date of Birth: _____ (dd/mm/yy)

Full Name (print): _____

Address: _____

Email: _____

Telephone (home): _____ (Cell): _____

PLEASE ATTACH DIRECT DEPOSIT FORM

Position: _____ Department: _____

Supervisor: _____

Hire/Change Date: _____ End Date (if applicable): _____

THIS SECTION TO BE COMPLETED BY HR DEPARTMENT

Council Approval: _____

Salary/Wage: \$ _____ Pay Scale: _____

Type of Employment

- Full-time -salaried
 Hourly on-call
 Director of Administration's Authority (three months)
 Other: Summer, Trainees, Seasonal (circle one): Please explain:

Comments:

Director of Administration

Date



Employee Name (Legal): _____

Preferred Name: _____

Address: _____

Subject: Temporary Employment

We are pleased to offer you the temporary casual position of _____ with (Dept) _____ In consideration of the terms, conditions, mutual benefits and obligations, the parties agree as follows:

<p>Start Date: _____ End Date: _____</p> <p>Please note that this position is not based on a guaranteed minimal number of hours or shifts. This is at the discretion of the Supervisor.</p> <p>Wage: _____ (based on hours actually worked)</p> <p>Supervisor(s): _____</p> <p>Hours of Work: As determined by the Supervisor with no guarantee of regular hours.</p> <p>Benefits: 4% vacation and as legislated (in additional to hourly rate)</p> <p>Other Details: Sipekne'katik will not provide any other employment benefits other than those detailed in this agreement and is required by legislation.</p>
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Please indicate your acceptance of this offer by signing below and returning it to the HR Department. This will acknowledge that I have read and accept the terms and conditions of this offer of employment.

Employee Signature

Date:

Supervisor Signature

Date

Director of Administration

Date



NOTE: AUTOMATIC PAYROLL DEPOSIT

Please attached an automatic deposit slip that you can either get from your bank or you can print one from your on-line banking account. You may also submit a void cheque.

You will be paid bi-weekly.

Thank you.



Determination of Exemption of an Indian's Employment Income

To make sure correct information is entered, we suggest that this form be filled out by the employer, in the presence of the employee.

As an employer, you can use this form to help determine if an employee's employment income is exempt from income tax. The term "employee" on this form refers only to an employee who is an Indian as defined in the Indian Act.

Read the instructions on the next page for more information on how to fill out this form.

Employee identification

Last name (please print)	Usual first name and initials	Social insurance number
Residential address including postal code		
Is the employee's residence located on a reserve?		Yes <input type="checkbox"/> No <input type="checkbox"/>

Indian status

Is the employee an Indian as defined in the Indian Act? Yes No

If yes, was the employee an Indian as defined in the Indian Act:

prior to 2011?

because of Bill C-3 (also known as the Gender Equity in Indian Registration Act)? Only income earned on or after January 31, 2011, may be exempt from tax.

because of the creation of the Qalipu Mi'kmaq First Nation Band? Only income earned on or after September 22, 2011, may be exempt from tax.

Type of exemption ^{*1}

The employee performs employment duties:

1. entirely on a reserve 2. entirely off a reserve 3. partially on and partially off a reserve

If you chose 3, indicate the percentage of the employment duties the employee performs on a reserve: _____ %

All of the employee's employment income is exempt from income tax if any one of the following situations applies. Check the appropriate box.

the employee performs **at least 90%** ^{*2} of the employment duties on a reserve (guideline 1);

the employee and the employer reside on a reserve (guideline 2);

the employee performs **more than 50%** of the employment duties on a reserve, and the employee or the employer resides on a reserve (guideline 3); or

the employee's employment duties are connected to the employer's non-commercial activities carried on exclusively for the benefit of Indians who, for the most part, reside on reserves and the employer resides on a reserve; **and** the employer is:

- an Indian band that has a reserve or a tribal council representing one or more Indian bands that have reserves; or
- an Indian organization controlled by one or more such bands or tribal councils and is dedicated exclusively to the social, cultural, educational, or economic development of Indians who, for the most part, reside on reserves (guideline 4).

^{*1} The type of exemption is based on the Indian Act Exemption for Employment Income Guidelines. For a full description of the Guidelines including examples of exempt income and term definitions, go to canada.ca/en/revenue-agency/services/aboriginal-peoples/indian-act-exemption-employment-income-guidelines.

^{*2} **Proration rule may apply:** When less than 90% of the duties of an employment are performed on a reserve and the employment income is not exempted by another guideline, the exemption is to be prorated. The exemption will apply to the portion of the income related to the duties performed on the reserve.

Employee certification

I certify that the information given on this form is correct and complete.

Signature _____ Date _____



Oath of Confidentiality

Oath of Confidentiality for anyone, including, but not limited to, staff, volunteers, visiting professionals, and students are responsible to protect and care for all Sipekne'katik information and property entrusted to them.

I acknowledge and solemnly swear/affirm that I will keep absolutely confidential any and all knowledge and information, of which I have access due to my position/role at the Sipekne'katik.

I will not, without due authority, discuss with any other person or personnel either by word, letter, or other forms of communication any matter directly or indirectly involving the Sipekne'katik private affairs.

I understand that my obligation to maintain confidentiality herein shall survive the expiry or termination of my employment, contract, or association with the Sipekne'katik. If the role is a confidential health, personnel, or financial these are binding upon me forever.

Name (print) _____

Signature _____

Sworn at _____, in the Province of Nova Scotia,

this day _____ of _____, 20_____.

Witnessed by: _____

Manager/Director who witnessed employee signature

Date



APPENDIX I

Waiver of Liability & Emergency Care

Employee Name:	
Address:	
Phone/Cell:	
Email:	
Emergency Contacts Name: Relationship: Phone/Cell: Address:	
Emergency Contacts Name: Phone/Cell: Address:	
Optional Other details (e.g. special needs, allergies, medications taken regularly)	

EMERGENCY Authorization: (Emergency event: illness, distress, injury and other related)

Sipekne'katik has my permission to call my physician, Sipekne'katik Heath Center physician, 911, and/or send me to the Hospital, and the medical personnel have my permission to provide treatment that a physician deems necessary for my well-being. Sipekne'katik will make every attempt to contact the listed Emergency Contacts in the event of such an emergency.

Signature: _____ Date: _____



Agreement of Understanding Of the Human Resources Policy & Financial Guidelines

I, _____ (Name/Position Title) of the Sipekne'katik Administration understand the Human Resources Policy (Administrative Policy and Procedure Manual, as approved by Chief and Council) & Financial Guidelines that are currently in effect for the Sipekne'katik. **I do understand I must perform my work-related duties in compliance with the HR Polices and Financial Guidelines.**

I am signing below that I have been given a copy of the updated polices listed here, and have read, and have been given the opportunity to ask questions to the HR Manager.

Name/Position Title

Signature

Date (dd/mm/yy)



APPENDIX C

Code of Conduct and Code of Ethics

During work hours, employees must devote themselves exclusively to their duties of employment; be prompt and courteous in their performance; as well as adhere to the policies and procedures of Sipekne'katik and work to promote Sipekne'katik, its vision, goals and objectives.

- (1) Employees must act in complete compliance with all Sipekne'katik policies and Sipekne'katik Financial Administration Law. A breach of any Sipekne'katik policy may result in progressive discipline in accordance with this policy.
- (2) Employees shall carry out the duties of their positions conscientiously, loyally and honestly, remembering that the primary work task is to serve Sipekne'katik and its members. Financial integrity is a fundamental obligation of any employee and failure to comply in any manner to manage the financial accounts of the Sipekne'katik may result in disciplinary action, up to and including immediate termination for just cause.
- (3) Employees shall respect the integrity and dignity of the organization, its programs, staff and all other affiliated agencies.
- (4) Employees shall conduct themselves, while on and off duty, in person and on all social media platforms, in a manner that will continue to reflect positively upon their employment, be a credit to themselves, their department, and Sipekne'katik. Any conduct which negatively impacts the reputation of Sipekne'katik will not be condoned and may be subject to disciplinary action, up to and including immediate termination for just cause.
- (5) Employees shall work continuously towards self-improvement through self-evaluation and training.
- (6) Information received by employees while on the job from any source is absolutely confidential and shall not be disclosed to any other person except in accordance with these policies.
- (7) Punctuality of employees is a fundamental obligation of the job. In the event of tardiness, the employee must contact the immediate supervisor before the commencement of the work day and provide an expected time of arrival.
- (8) Employees shall use their initiative to find ways of doing their work more efficiently and economically.
- (9) Employees shall follow job related directions attentively and cooperate with their Manager/Program Director.
- (10) Employees shall maintain a satisfactory standard of dress and general appearance appropriate to their duties.
- (11) Employees shall use equipment, property or supplies, which are owned, leased or rented, by Sipekne'katik for authorized purposes only.
- (12) Employees shall protect and care for all Sipekne'katik property entrusted to them and report to their relevant Manager any missing equipment or faulty equipment that requires repair.
- (13) Employees shall not engage in any public criticism of Sipekne'katik, Chief and Council, employees, or the approved policies or decisions of Sipekne'katik.
- (14) Employees are encouraged to recommend to their Manager, within their sphere of responsibility, changes of policy which they believe appropriate. Employees will bring forward any concerns regarding decisions, actions, etc., according to policies and procedures.

(15) Employees shall not be impaired by alcohol or drugs at any time while on duty. Employees must notify their supervisor if their medical treatment impedes their ability to work safely or to meet expectations with good judgement. This includes potential side effects of any medical treatments.

(16) Gifts or Benefits

An officer or employee or a member of their family must not accept a gift or benefit that might reasonably be seen to have been given to influence the officer or employee in the exercise of their powers or performance of their duties or function.

Despite the paragraph above, a gift or benefit may be accepted if the gift or benefit

a) would be considered within

- Normal exchanges common to business relationships, or
- Normal exchanges common at public cultural events of Sipekne'katik;

b) Is given by a close friend or relative as an element of that relationship; or

c) Is a type that the policies or procedures of Sipekne'katik have determined would be acceptable if offered by Sipekne'katik to another person.

(17) Employees will not participate in, or condone any behavior that is intended to harass, degrade, humiliate, intimidate or cause fear to any other employee, member, client, volunteer of Sipekne'katik.

(18) Employees will respect the culture, traditions and teachings of the Mi'kmaq nation and act accordingly.

(19) Employees will treat others with fairness and respect and be open to other's opinions, personal preferences, and cultural differences that may be different than their own.

Name (printed)

Name (signature)

Date



Sipekne'katik Band Council

522 Church St. Indian Brook 14, NS B0N 2H0

Employee: _____ Position/Department: _____

Week of: _____

Day	Date	Morning In	Morning Out	Afternoon In	Afternoon Out	Evening In	Evening Out
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							
Saturday							
Sunday							
Day	Date	Morning In	Morning Out	Afternoon In	Afternoon Out	Evening In	Evening Out
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							
Saturday							
Sunday							

Employee Signature: _____ Date: _____

Supervisor Signature: _____ Date: _____

* Sipekne'katik's payroll begins on Mondays, every two weeks. Timesheets will not be accepted without supervisor signature.