

Assignment Begin Checklist

Colombia

Confidential

SmartLabor Request Number :	
AC Name:	Assigned HP Worksite:
Supplier:	Building Assigned:
Supplier Contact (name, email, phone#):	Assignment Start Date:
HP Engagement Manager (name, email):	
Mandatory Conditions of Assignment Verification (provide completion dates for each requirement listed below)	Safety Training/Skill Verifications Received (please list all requested/mandatory trainings and skill verifications, check for completion and add date completed)
Drug Test Completion – (with the permission of the candidate for this)	_____ / / _____
Background Check Completed (with the permission of the candidate for this)	_____ / / _____
Non-Disclosure Agreement/CDA signed	_____ / / _____
Is contractor a citizen of Restricted Country listed in country groups D1, E1, or E2 in Supplement 1 part 740 of the US Export Administration Regulations? (Yes/No) If YES, please provide contractor’s country of citizenship or permanent residence. _____	_____ / / _____ _____ / / _____ _____ / / _____ _____ / / _____ _____ / / _____ _____ / / _____ _____ / / _____ _____ / / _____ _____ / / _____
If YES - HP Labor Desk notifies Engagement manager that AC is subject to VTH process and must complete the Restricted National Hire form	_____ / / _____ _____ / / _____
Note: HP requires this information to obtain any government export authorizations that are required to transfer job-related technical data to the contractor. A refusal to provide this information may impact HP’s ability to obtain any necessary government export authorizations.	_____ / / _____
AC Orientation completed	_____ / / _____
Restricted Party List (RPL) checked	_____ / / _____
CW Code of conduct training completed	_____ / / _____
Has contractor been an HP employee within the past 12 months?	Yes: <input type="checkbox"/> No: <input type="checkbox"/>

*Reference for RPL Checklist website:
<http://apps.export.gov/csl-search#/csl-search>
<http://eur-lex.europa.eu/homepage.html>

Has contractor been an HP employee, and terminated their employment via the Enhanced Early Retirement (EER) program, within the past 24 months?	Yes: <input type="checkbox"/> No: <input type="checkbox"/>	
If yes, please provide the following: Last day of HP employment: mm/dd/yy Former HP Manager's name: _____		
Has the contractor previously worked at HP as a contractor?	Yes: <input type="checkbox"/> No: <input type="checkbox"/>	
If yes, please provide the following: First work day of last assignment at HP: mm/dd/yy Last work day of last assignment at HP: mm/dd/yy HP Engagement Manager Name: _____ Reason for assignment ending: _____		

Assignment End Agreement

- Contractor will return all issued HP Badge/Credentials as well as HP Equipment (i.e. Laptop; Active Key; Router/Hub; etc.) within 5 working days after Assignment End Date. After this period, the Supplier will be responsible to assure the return of HP Properties as well as the liability for replacement costs and/or agreed contractual penalties.
- Contractor/Supplier Representative will be afforded 72 hours (3 Business days) after assignment End Date to collect personal belongings left at the HP workplace. After this period, HP will not be responsible for any such items or liable for associated replacement value.

Assignment Begin Checklist Signage

I, (Supplier Rep. name) , the Supplier Representative of (Supplier name) , hereby verify that the above required Assignment Conditions have been completed prior to the start of (AC name) , an employee of (Supplier name) , as an Agency Contractor with assignment at Hewlett Packard.

Supplier Representative: _____

Date: ___/___/___

Agency Contractor: _____

Date: ___/___/___

To be completed by Subcontractor Supplier, if applicable

I, (HP Subcontractor Supplier Rep. name) , the Supplier Representative of (Subcontractor Supplier name) , hereby verify that the above required Assignment Conditions have been completed prior to the start of (AC name) , an employee of (Subcontractor Supplier name) , as an Agency Contractor with assignment at Hewlett Packard.

Subcontractor Supplier Representative: _____

Date: ___/___/___