

# Assignment Begin Checklist

## EMEA

### Confidential

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|---|--|
| SmartLabor Request Number:  |  |
| AC Name:  | Assigned HP Worksite:  |
| Supplier:   | Building Assigned:   |
| Supplier Contact (name, email, phone#):   | Assignment Start Date:   |
| HP Engagement Manager (name, email):  |  |
| <b>Mandatory Conditions of Assignment Verification</b> (provide completion dates for each requirement listed below)   | <b>Safety Training/Skill Verifications Received</b> (please list all requested/mandatory trainings and skill verifications, check for completion and add date completed) |
| Background Check Completed (if applicable) <span style="float: right;">___/___/___<br/>mm/dd/yy</span>  | _____ / / _____  |
| Non-Disclosure Agreement/CDA signed <span style="float: right;">___/___/___</span>  | _____ / / _____  |
| AC Orientation completed <span style="float: right;">___/___/___</span>   | _____ / / _____  |
| Restricted Party List (RPL) checked <span style="float: right;">___/___/___</span>  | _____ / / _____  |
| CW Code of conduct training <span style="float: right;">___/___/___</span>  | _____ / / _____  |
| Has contractor been an HP employee within the past 12 months <b>Yes:</b> <input type="checkbox"/><br><b>No:</b> <input type="checkbox"/>  | _____ / / _____  |
| Has contractor been an HP employee and terminated their employment via the Enhanced Early Retirement (EER) program within the past 24 months? <b>Yes:</b> <input type="checkbox"/><br><b>No:</b> <input type="checkbox"/>   | _____ / / _____  |
| If yes, please provide the following:<br><br>Last day of HP employment: mm/dd/yy<br>Former HP Manager's name: _____   | _____ / / _____  |
| Has the contractor previously worked at HP as a contractor? <b>Yes:</b> <input type="checkbox"/><br><b>No:</b> <input type="checkbox"/>   | _____ / / _____  |
| If yes, please provide the following:<br><br>First work day of last assignment at HP: mm/dd/yy<br>Last work day of last assignment at HP: mm/dd/yy<br>HP Engagement Manager Name: _____<br>Reason for assignment ending: _____  | _____ / / _____  |
| Is contractor eligible to work in this country <b>Yes:</b> <input type="checkbox"/><br><b>No:</b> <input type="checkbox"/>  | _____ / / _____  |
| Documentation that must be supplied   |  |
| National ID Card/Passport <b>Yes:</b> <input type="checkbox"/>  |  |
| Visa (if required)<br>Expiry Date of Visa ___/___/___ <b>Yes:</b> <input type="checkbox"/>  |  |
| Extension of contract given <b>Yes:</b> <input type="checkbox"/>  |  |
| Date of completions of contract ___/___/___   |  |
| Expiry date on Visa rechecked to ensure <b>Yes:</b> <input type="checkbox"/>  |  |
| Is contractor a citizen of Restricted Country listed in country groups D1, E1, or E2 in <a href="#">Supplement 1 part 740</a> of the US Export Administration Regulations? (Yes/No)<br>If YES, please provide contractor's country of citizenship or permanent residence. _____ | <b>Yes:</b> <input type="checkbox"/><br><b>No:</b> <input type="checkbox"/>  |

\*Reference for RPL Checklist website:

<http://apps.export.gov/csl-search#/csl-search>

<http://eur-lex.europa.eu/homepage.html>

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|--|--|--|--|
| <p>If YES - HP Labor Desk notifies Engagement manager that AC is subject to VTH process and must complete the Restricted National Hire form</p> <p>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.</p> |  |  |  |
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**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,       (HP Approved Supplier Rep. name)      , the Supplier Representative of       (HP Approved Supplier name)      , hereby verify that the above required Assignment Conditions have been completed prior to the start of       (AC name)      , an employee of       (HP Approved Supplier name or Subcontractor Supplier Name)      , as an Agency Contractor with assignment at Hewlett Packard.

HP Approved 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: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Please upload completed document to the relevant SmartLabor order.**