

Heather



NISHNAWBE - ASKI
Legal Services Corporation

ENTERED APR 18 2019

APIPO Q

Employee Information

1. Personal Information

Full Given Name: Saunnawap Donald
Last First M Initial.

Address: P.O. Box 1531
Street Address Box #

Sioux Lookout ON P8T1C3
City/Town Province Postal Code

Home Phone: (807) 738 4373 Alternate Phone: () 737-5201

Primary Email: dsaunnawap@nanlegal.on.ca

SSN #: _____ Status # _____

2. Job Information

Title: Community Worker Employee ID: _____

Supervisor: Heather Boudreau Department: LAD

Work Location: Sioux Lookout Work Email: dsaunnawap@nanlegal.on.ca

Work Phone: (807) 737-5201 Cell Phone: ()

Start Date: Nov 11/04 Benefits: yes Pension: Y / N yes

Term Date: _____ Salary: \$ 47,501.64

3. Emergency Contact Information

Full Name: Saunnawap Donald
Last First M Initial.

Address: 41 2nd Ave
Street Address Box #

Sioux Lookout ON
City/Town Province Postal Code

Primary Phone: (807) 738.3767 Alternate Phone: (807) 738.1032

Relationship: Son



Nishnawbe-Aski Legal Services

Lap Top/Computer Agreement

1. NALSC has issued you a business lap top/computer for work-related purposes. Employees in possession of NALSC equipment are expected to use the equipment for business purposes only and to maintain the equipment from misuse, damage or theft.
2. Employees who are provided with NALSC lap tops are accountable for any damage that may occur.
3. If a NALSC-owned lap top is damaged, lost, or stolen, it must be reported immediately to the Manager and the Finance department.
4. If a NALSC-owned lap top/computer is damaged, lost, or stolen through the negligence of the authorized user, that individual will be responsible for reimbursing NALSC for all repair or replacement costs. He or she will be required to reimburse NALSC the purchase price of the equipment.
7. At any time the manager of the employee may request for the lap top/computer to be returned.

Employee Declaration

I, Don Saennawap, have read and understand the above Lap top/Computer Agreement and consent to adhere to the rules outlined therein.

Don Saennawap
Employee Signature

Mad Jean Robinson
Manager/Supervisor Signature

Date Mar 26/14

Laptop Or Computer? <u>Laptop</u>	Serial# <u>5CB4025PBB</u> <u>(5CB403286Y) KR.</u>	Colour <u>dk grey/black</u>
Brand/Model <u>HP Probook 6570b</u>	Brand New? <u>Yes</u> Purchase Date: <u>LAO March 2014</u>	Other: <u>Computer case</u>



LEGAL AID ONTARIO
AIDE JURIDIQUE ONTARIO

NON-DISCLOSURE & CONFIDENTIALITY AGREEMENT

As an employee of Legal Aid Ontario, you are privy to confidential information. All information provided to a Legal Aid Ontario employee by a client is confidential, according to the provisions of the *Legal Aid Services Act*. This includes information about the case the applicant is involved in, as well as the applicant's personal and financial information. Most information provided by lawyers is also confidential.

All LAO records are to be treated as confidential material and may not be disclosed except in accordance with the provisions of LAO's Privacy Policy.

NO ONE IS TO READ RECORDS except insofar as the job requires it. **RECORDS ARE NOT TO BE DISCUSSED** among fellow workers except for an LAO business purpose. They should be treated impersonally as part of the day's work. All records are business documents and must be treated as such.

We are entrusted with the confidential records of clients and of personnel throughout the organization. It is expected that you will comply with the principles set forth in the LAO Privacy Policy and privacy principles. The provisions of the *Legal Aid Services Act* make it an offence to disclose confidential information.

Employee Statement of Non-Disclosure and Confidentiality

I have read and understood this statement. I agree to abide by the LAO Privacy Policy as a condition of employment with Legal Aid Ontario. Unauthorized disclosure of any confidential material may result in immediate discharge from Legal Aid Ontario.

I acknowledge that I am bound by the terms of this agreement and the requirements of the *Legal Aid Services Act* and that these confidentiality requirements continue after my employment with Legal Aid Ontario has ceased. I understand that a breach of the confidentiality provisions of the *Legal Aid Services Act* may constitute an offence for which I may be prosecuted.

Don Sainnawap
Employee Signature

Mar 26/14
Date

Don Sainnawap
Print full name

Dept/Area Office

NEW HIRE CHECKLIST

EMPLOYEE <i>DON SAINNAWAP</i>		DATE HIRED <i>NOV 1, 2004</i>
JOB TITLE <i>Community Legal Worker</i>	CURRENT SALARY	PROBATIONARY END DATE
TYPE PERMANENT FT <input checked="" type="checkbox"/> PERMANENT PT <input type="checkbox"/> FIXED TERM <input type="checkbox"/> CASUAL <input type="checkbox"/>		

PERSONAL INFORMATION

BIRTHDATE	HOMEPHONE
OTHER CONTACT # (CELL, ETC.)	EMERGENCY CONTACT
HOME ADDRESS	SIN#
<input type="checkbox"/>	Copy (front and back) of Status Card (if applicable)
<input checked="" type="checkbox"/>	Banking information (void cheque or notification from bank)
<input type="checkbox"/>	Letter of Offer
<input type="checkbox"/>	Signed Contract
<input checked="" type="checkbox"/>	Criminal Records Check
<input type="checkbox"/>	Proof of 2M Liability Car Insurance
<input type="checkbox"/>	Application – resume, cover letter, notes from interview, reference checks, and job description
<input type="checkbox"/>	Signed document stating they have read and understood the NALSC policies and procedures manual (attached)
<input type="checkbox"/>	Application for Group Insurance Coverage

COMMENTS: