

Employee Training Agreement

This Employee Training Agreement is made on January 15, 2024 between **iPloy, OPC**, with its place of business at the **16th floor One Montage Tower, Archbishop Reyes Avenue, Cebu City** ("Employer") and Jelaina L. Toquiro [Employee's Name], an individual with the address of Center Nalada, City of Naga, Cebu [Employee's Address] ("Employee").


Recitals:

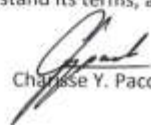
- A. The Employer is providing a one-week training program to the Employee to enhance their skills and knowledge in the field of Customer Service and as part of the Onboarding process.
- B. The Employee has agreed to participate in this one-week training program.
- C. The Employer has agreed to pay the Employee a salary for the duration of the training. D. The Employee has agreed to the terms and conditions concerning the Pre-Employment Medical Examination (PEME) and the submission of Employment Requirements.

Agreement:

1. **Training Obligation:** The Employee agrees to attend and complete the one-week training program provided by the Employer. The training will commence on July 25, 2024 and conclude on July 26, 2024.
2. **Salary Payment:** In consideration of the Employee's completion of the training, the Employer agrees to pay the Employee a salary for the duration of the training, payable at the nearest payout schedule (15th or 30th of the month) upon successful completion.
3. **Non-Eligibility for Incomplete Training:** The Employee acknowledges and agrees that if they fail to complete the one-week training program for any reason, they will not be eligible to receive the salary payment for the training period.
4. **Pre-employment Physical Examination (PEME):** The Employee acknowledges and agrees that if they fail to attain their employment with the company up until regularization. The cost of the pre-employment examination will be deducted from the final pay
5. **Submission of Critical and Non- Critical Requirements:** This agreement stipulates that should the Employee fail to meet the requirements by the specified deadline, even after multiple follow- ups, they are required to cover a portion of any penalties imposed by government authorities
6. **Entire Agreement:** This Agreement constitutes the entire understanding and agreement between the parties with respect to the subject matter hereof, and supersedes all prior negotiations, representations, and agreements between the parties, whether written or oral.
7. **Amendments:** This Agreement may be amended only by a written instrument executed by both parties.

By signing below, the parties acknowledge that they have read this Agreement, understand its terms, and agree to be bound by them.


JELAINA L. TOQUIRO July 24, 2024
Employee Complete Name & Signature/Date


Charisse Y. Pacot

Training Associate

NON-DISCLOSURE AGREEMENT

THIS AGREEMENT is made on

(Date) July 26, 2024

BETWEEN

1. **IPLOY OPC.** (the "Disclosing Party"); and
2. Jelaica L. Toquire (the "Receiving Party"),

collectively referred to as the "Parties".

RECITALS

A. The Receiving Party understands that the Disclosing Party has disclosed or may disclose information relating to the training which to the extent previously, presently, or subsequently disclosed to the Receiving Party is hereinafter referred to as "Proprietary Information" of the Disclosing Party.

OPERATIVE PROVISIONS

1. In consideration of the disclosure of Proprietary Information by the Disclosing Party, the Receiving Party hereby agrees:
 - 1.1. to hold the Proprietary Information in strict confidence and to take all reasonable precautions to protect such Proprietary Information (including, without limitation, all precautions the Receiving Party employs with respect to its own confidential materials),
 - 1.2. not to disclose any such Proprietary Information or any information derived therefrom to any third person,
 - 1.3. not to copy or remove and not to take pictures of any Proprietary information,
 - 1.4. not to make any use whatsoever at any time of such Proprietary Information except to evaluate internally its relationship with the Disclosing Party, and
 - 1.5. not to copy or reverse source any such Proprietary Information. The Receiving Party shall procure that its employees, agents and sub-contractors to whom Proprietary Information is

disclosed or who have access to Proprietary Information sign a nondisclosure or similar agreement in content substantially similar to this Agreement

2. Without granting any right or authorization, the Disclosing Party agrees that the foregoing shall not apply with respect to any information after five years following the disclosure thereof or any information that the Receiving Party can document
 - 2.1. is or becomes (through no improper action or inaction by the Receiving Party or any affiliate, agent, consultant or employee) generally available to the public, or
 - 2.2. was in its possession or known by it prior to receipt from the Disclosing Party as evidenced in writing, except to the extent that such information was unlawfully appropriated, or
 - 2.3. was rightfully disclosed to it by a third party, or
 - 2.4. was independently developed without use of any Proprietary Information of the Disclosing Party. The Receiving Party may make disclosures required by law or court order provided the Receiving Party uses diligent reasonable efforts to limit disclosure and has allowed the Disclosing Party to seek a protective order.
3. Immediately upon the written request by the Disclosing Party at any time, the Receiving Party will return to the Disclosing Party all Proprietary Information and all documents or media containing any such Proprietary Information and any and all copies or extracts thereof, save that where such Proprietary Information is a form incapable of return or has been copied or transcribed into another document, it shall be destroyed or erased, as appropriate.
4. The Receiving Party understands that nothing herein
 - 4.1. requires the disclosure of any Proprietary Information or
 - 4.2. requires the Disclosing Party to proceed with any transaction or relationship.
5. The Receiving Party further acknowledges and agrees that no representation or warranty, express or implied, is or will be made, and no responsibility or liability is or will be accepted by the Disclosing Party, or by any of its respective directors, officers, employees, agents or advisers, as to, or in relation to, the accuracy or completeness of any Proprietary Information made available to the Receiving Party or its advisers; it is responsible for making its own evaluation of such Proprietary Information.
6. The failure of either party to enforce its rights under this Agreement at any time for any period shall not be construed as a waiver of such rights. If any part, term or provision of this Agreement is held to be illegal or unenforceable neither the validity, nor enforceability of the

remainder of this Agreement shall be affected. Neither Party shall assign or transfer all or any part of its rights under this Agreement without the consent of the other Party. This Agreement may not be amended for any other reason without the prior written agreement of both Parties. This Agreement constitutes the entire understanding between the Parties relating to the subject matter hereof unless any representation or warranty made about this Agreement was made fraudulently and, save as may be expressly referred to or referenced herein, supersedes all prior representations, writings, negotiations or understandings with respect hereto.

7. This Agreement shall be governed by the laws of the jurisdiction in which the Disclosing Party is located (or if the Disclosing Party is based in more than one country, the country in which its headquarters are located) (the "Territory") and the parties agree to submit disputes arising out of or in connection with this Agreement to the non-exclusive of the courts in the Territory.

IPLOY OPC

By: Onboarding Specialist

Name: Jade Lenizo Mata

Title: Onboarding Specialist

Address: #35 Salvador Extension Labangon
Cebu City

Date: _____

Receiving Party

By: New Employee

Name: Jelaica L. Toquire

Title: CSR

Address: Center Nodalact, Naga, Cebu

Date: July 24, 2024



PERSONAL DATA SHEET

2x2 Picture

INSTRUCTIONS:

1. Answer the questions completely and honestly in the spaces provided.
2. Please **PRINT** legibly.
3. **DO NOT LEAVE ANY SPACE BLANK.** Write "n/a", "not applicable" or "none"

HR PDS-01

PART 1		
(For HR use only)	(For HR use only)	(For HR use only)
EMPLOYEE NUMBER	DATE HIRED	DEPARTMENT
4922	July 25, 2024	

PART 2 Basic Information & Contact Details			
LAST NAME: TOQUIRO	FIRST NAME: JELAICA	MIDDLE NAME: LUMANGTAD	
NICKNAME: LAICA	MOTHER'S FULL MAIDEN NAME: FRANCISCA LUMANGTAD TOQUIRO		
CURRENT ADDRESS (House # / Lot# / Block # / Street, Barangay, Municipality / City, Province, Zip Code) 635 F. Pacaña Street Tira, Cebu City 6000			
PROVINCIAL ADDRESS (House # / Lot# / Block # / Street, Barangay, Municipality / City, Province, Zip Code) Purok 4 Center Naalad, City of Naga, Cebu 6037			
Land Phone No.	Mobile No.	Mobile No.	
SSS No. 0643714650	PAG-IBIG No. 191241621517	PHILHEALTH No. 120516128411	TIN 504308466
BIRTH DATE SEPTEMBER 7, 2000	BIRTH PLACE NAGA CEBU	GENDER FEMALE	BLOOD TYPE
MARITAL STATUS <input checked="" type="checkbox"/> Single <input type="checkbox"/> Legally Separated <input type="checkbox"/> Married <input type="checkbox"/> Widow/Widower	NAME OF SPOUSE (Married) SPOUSE TIN	Email Address(s) jelaicatoquiroy@gmail.com	
Are you related by kinship or marriage up to the 3 rd degree to any current employee of iPloy? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, give NAME and RELATIONSHIP			

PART 3 Family Background					
NAME OF SPOUSE (if married)		SPOUSE'S EMPLOYER		SPOUSE'S DATE OF BIRTH	
NO. OF BROTHER/S	NO. OF SISTER/S	NO. OF CHILDREN		BIRTH ORDER (Only Child, 1 st , 2 nd , etc)	
NAME OF CHILDREN (if any)	DATE OF BIRTH	NAME OF SIBLINGS		DATE OF BIRTH & CIVIL STATUS	
FATHER'S NAME	DATE OF BIRTH	OCCUPATION	MOTHER'S NAME	DATE OF BIRTH	OCCUPATION
DECEASED	DECEASED	CARPENTER	FRANCISCA CABIGAS	03/09/1955	HOUSEWIFE

PART 4 Emergency Contact (List at least 2 Contact Persons)		
CONTACT PERSON (Last, First)	CONTACT PHONE NO.	RELATIONSHIP TO EMPLOYEE (Optional)
CABIGAS FRANCISCA	09608038040	Mother / Daughter

PART 5 Educational Attainment			
LEVEL	NAME OF SCHOOL & ADDRESS	DATES ATTENDED (mm/yr) – (mm/yr)	GRADUATE (Yes or No)
PRIMARY EDUCATION	Naalad elementary school Lower Naalad, City of Naga, Cebu	2006 - 2013	✓
SECONDARY EDUCATION	Naalad National High School Lower Naalad, Naga, Cebu	2013 - 2017	✓
VOCATIONAL & NON-DEGREE COURSES	Course:		
TERTIARY EDUCATION	Degree/Course:		
POSTGRADUATE & GRADUATE STUDIES	Degree: Degree: Degree:		

PART 6 Employment History (From most recent and for all positions held)			
EMPLOYER'S NAME FIS Global Solutions		ADDRESS & TEL. NO.	
JOB TITLE CSR	SALARY 18,000	PERIOD COVERED (mm/yr)	
		FROM 10/2019	TO 02/2021
SUPERVISOR'S NAME	SUPERVISOR'S TITLE	EMPLOYEES SUPERVISED (if applicable)	
REASON FOR LEAVING My father died			
EMPLOYER'S NAME TECHMAMINRA		ADDRESS & TEL. NO.	
JOB TITLE CSR	SALARY 16,000	PERIOD COVERED (mm/yr)	
		FROM 2021	TO 2022
SUPERVISOR'S NAME	SUPERVISOR'S TITLE	EMPLOYEES SUPERVISED (if applicable)	
REASON FOR LEAVING SALARY ISSUE / DISPUTE			
EMPLOYER'S NAME CONCENTRIX		ADDRESS & TEL. NO.	
JOB TITLE CSR	SALARY 26,500	PERIOD COVERED (mm/yr)	
		FROM 2022	TO 2023
SUPERVISOR'S NAME	SUPERVISOR'S TITLE	EMPLOYEES SUPERVISED (if applicable)	
REASON FOR LEAVING THE ACCOUNT / SITE WAS CLOSED			
EMPLOYER'S NAME PERFORMAX		ADDRESS & TEL. NO.	
JOB TITLE Advisor sales 1	SALARY 19,000	PERIOD COVERED (mm/yr)	
		FROM 2023	TO 2024
SUPERVISOR'S NAME	SUPERVISOR'S TITLE	EMPLOYEES SUPERVISED (if applicable)	
REASON FOR LEAVING SALARY ISSUE OR DISPUTE			
EMPLOYER'S NAME		ADDRESS & TEL. NO.	
JOB TITLE	SALARY	PERIOD COVERED (mm/yr)	
		FROM	TO
SUPERVISOR'S NAME	SUPERVISOR'S TITLE	EMPLOYEES SUPERVISED (if applicable)	
REASON FOR LEAVING			

PART 7

Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magna Carta for Disabled Persons (RA 7277); and Solo Parents Welfare Act 2000 (RA 8972) please answer the following items:

Are you a member of any indigenous group?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	If yes, please specify:
Do you identify as differently-abled?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	If yes, please specify:
Are you a solo parent?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	If yes, please specify:

PART 8
Character References

Give name, address, and telephone numbers of three (3) persons who know you other than those you have worked with.

	NAME	ADDRESS	TEL NO.
1	Marc Luke Montana	Tisa, Cebu City	09465185997
2	Gracelyn Panlag	Maalad, Naga, Cebu	NA
3	Crizhita Cabigas	Maalad Naga Cebu	NA

PART 9
Other Qualifications

Job-related training courses (give title and year), Job-related skills (other languages, computer and information technology, tools, machines, etc.), Job-related certificates and licenses (current only), Job-related awards and special accomplishments (publications, memberships in professional or honor societies, leadership activities, public speaking, and performance awards). Give dates and send documents

DATE (mny/year)	DESCRIPTION / TITLE

PART 10
ADDITIONAL IDENTIFICATION

	TYPE / CONTROL NO.	ISSUE DATE	EXPIRY DATE
PASSPORT DETAILS			
VISA DETAILS (if applicable)			
DRIVER'S LICENSE			
OTHER GOVT. ISSUED IDs: (For example: SSS, TIN, SOLO PARENT ID, PRC, ACR, etc.)			
MILITARY / GOVT. / CIVIL SERVICES (if any)			

Have you ever been formally charged of an administrative / civil/criminal offense?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If "Yes", please give details:
Have you ever been convicted of an administrative / civil/criminal offense?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If "Yes", please give details:

CERTIFICATION

I CERTIFY that, to the best of my knowledge and belief, all the information on an attached to this document is true, correct, complete and made in good faith. I UNDERSTAND that false or fraudulent information on or attached to this application may be grounds for not hiring me or terminate my employment from iPloy. I UNDERSTAND that any information I give may be investigated.



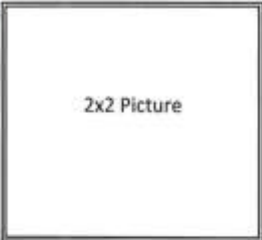
 Signature of Employee

July 24, 2024

 Date Signed



PERSONAL DATA SHEET



2x2 Picture

INSTRUCTIONS:

1. Answer the questions completely and honestly in the spaces provided.
2. Please **PRINT** legibly.
3. **DO NOT LEAVE ANY SPACE BLANK.** Write "n/a", "not applicable" or "none"

HR PDS-01

PART 1		
(For HR use only)	(For HR use only)	(For HR use only)
EMPLOYEE NUMBER	DATE HIRED	DEPARTMENT
4922	July 25, 2024	

PART 2 Basic Information & Contact Details			
LAST NAME: TAQUIRO		FIRST NAME: JELAICA	MIDDLE NAME: LUMANGTAD
NICKNAME: LACA		MOTHER'S FULL MAIDEN NAME: FRANCISCA LUMANGTAD TAQUIRO	
CURRENT ADDRESS (House # / Lot# / Block # / Street, Barangay, Municipality / City, Province, Zip Code) Center Naalad, City of Naga Cebu 6037			
PROVINCIAL ADDRESS (House # / Lot# / Block # / Street, Barangay, Municipality / City, Province, Zip Code) Center Naalad, City of Naga, Cebu 6037			
Land Phone No.		Mobile No. 09608639914	Mobile No.
SSS No. 0643714850	PAG-IBIG No. 101061621517	PHILHEALTH No. 120516198411	TIN 504305465
BIRTH DATE September 7, 2007	BIRTH PLACE NAGA CEBU	GENDER FEMALE	BLOOD TYPE
MARITAL STATUS <input checked="" type="checkbox"/> Single <input type="checkbox"/> Legally Separated <input type="checkbox"/> Married <input type="checkbox"/> Widow/Widower	NAME OF SPOUSE (Married) SPOUSE TIN	Email Address(s) jelaicatoquir@gmail.com	
Are you related by kinship or marriage up to the 3 rd degree to any current employee of iPloy? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, give NAME and RELATIONSHIP			

PART 3 Family Background					
NAME OF SPOUSE (if married)		SPOUSE'S EMPLOYER		SPOUSE'S DATE OF BIRTH	
NO. OF BROTHER/S	NO. OF SISTER/S	NO. OF CHILDREN	BIRTH ORDER (Only Child, 1 st , 2 nd , etc)		
NAME OF CHILDREN (if any)		DATE OF BIRTH	NAME OF SIBLINGS		DATE OF BIRTH & CIVIL STATUS
FATHER'S NAME	DATE OF BIRTH	OCCUPATION	MOTHER'S NAME	DATE OF BIRTH	OCCUPATION
DECEASED			FRANCISCA CABIGAS	03/09/1955	Housewife

PART 4 Emergency Contact (List at least 2 Contact Persons)		
CONTACT PERSON (Last, First)	CONTACT PHONE NO.	RELATIONSHIP TO EMPLOYEE (Optional)
CABIGAS FRANCISCA	09608038040	Mother



PART 5 Educational Attainment			
LEVEL	NAME OF SCHOOL & ADDRESS	DATES ATTENDED (mm/yr) – (mm/yr)	GRADUATE (Yes or No)
PRIMARY EDUCATION	Naalad High School Lower Naalad, Naga, Cebu	2006 - 2013	✓
SECONDARY EDUCATION	Naalad National High School Lower Naalad, Naga, Cebu	2013 - 2019	✓
VOCATIONAL & NON-DEGREE COURSES	Course:		
TERTIARY EDUCATION	Degree/Course:		
POSTGRADUATE & GRADUATE STUDIES	Degree: Degree: Degree:		

PART 6 Employment History (From most recent and for all positions held)			
EMPLOYER'S NAME FIS Global Solution		ADDRESS & TEL. NO.	
JOB TITLE CSR	SALARY 15,000	PERIOD COVERED (mm/yr)	
		FROM 10/2019	TO 02/2021
SUPERVISOR'S NAME	SUPERVISOR'S TITLE	EMPLOYEES SUPERVISED (if applicable)	
REASON FOR LEAVING My father died			
EMPLOYER'S NAME TECHMANTHA		ADDRESS & TEL. NO.	
JOB TITLE CSR	SALARY 16,000	PERIOD COVERED (mm/yr)	
		FROM 2021	TO 2022
SUPERVISOR'S NAME	SUPERVISOR'S TITLE	EMPLOYEES SUPERVISED (if applicable)	
REASON FOR LEAVING Salary issue / Dispute			
EMPLOYER'S NAME CONCENTEX		ADDRESS & TEL. NO.	
JOB TITLE CSR	SALARY 26,500	PERIOD COVERED (mm/yr)	
		FROM 2022	TO 2023
SUPERVISOR'S NAME	SUPERVISOR'S TITLE	EMPLOYEES SUPERVISED (if applicable)	
REASON FOR LEAVING The account was closed			
EMPLOYER'S NAME EPEFORMAX		ADDRESS & TEL. NO.	
JOB TITLE Advisor sales 7	SALARY 19,000	PERIOD COVERED (mm/yr)	
		FROM 2023	TO 2024
SUPERVISOR'S NAME	SUPERVISOR'S TITLE	EMPLOYEES SUPERVISED (if applicable)	
REASON FOR LEAVING Salary issue / Dispute			
EMPLOYER'S NAME		ADDRESS & TEL. NO.	
JOB TITLE	SALARY	PERIOD COVERED (mm/yr)	
		FROM	TO
SUPERVISOR'S NAME	SUPERVISOR'S TITLE	EMPLOYEES SUPERVISED (if applicable)	
REASON FOR LEAVING			

**PART 7**

Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magna Carta for Disabled Persons (RA 7277); and Solo Parents Welfare Act 2000 (RA 8972) please answer the following items:

Are you a member of any indigenous group?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	if yes, please specify:	
Do you identify as differently-abled?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	if yes, please specify:	
Are you a solo parent?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	if yes, please specify:	

PART 8**Character References**

Give name, address, and telephone numbers of three (3) persons who know you other than those you have worked with.

	NAME	ADDRESS	TEL. NO.
1	Marc Luke Monteciano	Tara, Cebu City	09465735947
2	Grasslyn Pamling	Makalad, Naga, Cebu	NA
3	Crisdante Cabingdas	Makalad, Naga, Cebu	NA

PART 9**Other Qualifications**

Job-related training courses (give title and year), job-related skills (other languages, computer and information technology, tools, machines, etc.), job-related certificates and licenses (current only), job-related awards and special accomplishments (publications, memberships in professional or honor societies, leadership activities, public speaking, and performance awards). Give dates and send documents

DATE (mm/year)	DESCRIPTION / TITLE

PART 10**ADDITIONAL IDENTIFICATION**

	TYPE / CONTROL NO.	ISSUE DATE	EXPIRY DATE
PASSPORT DETAILS			
VISA DETAILS (if applicable)			
DRIVER'S LICENSE			
OTHER GOV'T. ISSUED IDs: (For example: SSS, TIN, SOLO PARENT ID, PRC, ACR, etc.)			
MILITARY / GOV'T. / CIVIL SERVICES (if any)			

Have you ever been formally charged of an administrative / civil/criminal offense?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	if "Yes", please give details:
Have you ever been convicted of an administrative / civil/criminal offense?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	if "Yes", please give details:

CERTIFICATION

I CERTIFY that, to the best of my knowledge and belief, all the information on an attached to this document is true, correct, complete and made in good faith. I UNDERSTAND that false or fraudulent information on or attached to this application may be grounds for not hiring me or terminate my employment from iPloy. I UNDERSTAND that any information I give may be investigated.

Signature of Employee

July 20, 2024

Date Signed

CONSENT FOR PRE-EMPLOYMENT REFERENCE AND BACKGROUND CHECKS

I, Jelaica L. Toquiro hereby authorize Iploy Inc. and/or it's representatives to make investigation of my background, references, character, past employment, consumer reports, education, and criminal history record information which may be in any state or local files, including those maintained by both public and private organizations, and all public records, for the purpose of confirming the information contained on my application and/or obtaining other information which may be material to my qualifications for employment. A telephone facsimile (fax), scanned copy or xerographic copy of this consent shall be considered as valid as the original consent.

I hereby consent to the Company's verifying all the information I have provided on my application form. I also agree to execute as a condition of employment or a condition of continued employment any additional written authorization necessary for the company to obtain access to and copies of records pertaining to this information. With regard to the foregoing disclosures, I hereby agree to release any person, company, or other entity from any and all causes of action that otherwise might arise from supplying the Company with information it may request pursuant to this release. I understand that any false answers or statements, or misrepresentations by omission made by me on this application or any related document, will be sufficient for rejection of my application or of my immediate discharge should such falsifications or misrepresentations be discovered after I am employed.

I release Iploy Inc., its employees, designated representatives, agents, officers and trustees from any and all claims of liability or damage due to either the procurement or the true and accurate disclosure of such records or information.

Applicant Name: Jelaica L. Toquiro

Present Address: 035 F Pacaña Street tirag Cebu City

Social Security Number: _____ Date of Birth: 09/07/2001

Signature: 

Date: July 26, 2025

SIGN-ON BONUS POLICY

Policy:

The purpose of the sign-on bonus policy is to outline the requirements, the timing of payments, and the implementation of the sign-on bonus. The sign-on bonus is a non-recurring and non-accumulating sum of money that is paid to an employee as gratitude for joining the Company. The sign-on bonus is subject to taxes.

Eligibility for Sign-On Bonus:

To be eligible for a sign-on bonus the employee must meet the following criteria:

- A regular employee
- No resignation submitted before the releasing date of the sign-on bonus
- Must not be on any form of floating status
- Must not be on Floating, AWOL, Terminated and EOC status or other forms of separation
- Must be an active employee on the release date of the sign-on bonus.

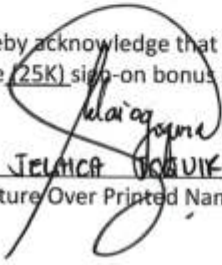
Releasing of Sign-On Bonus:

- The release of the sign-on bonus will be on the 15th day of succeeding month of the anniversary date of the employee.

The company reserves the right to change these terms and conditions at any time without prior notice. If any changes are made, you will be notified immediately.

Acknowledgment

I hereby acknowledge that I have read, understand, and agree to the terms and conditions of the (25K) sign-on bonus policy.

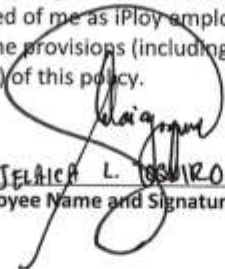

JELMICA JOAQUIN
Signature Over Printed Name/Date

UNDERTAKING

This document verifies that I have read the policy listed below and have discussed any questions with the Onboarding Specialist / Supervisor/Manager. I have been informed that my Supervisor/Manager has a copy of this policy and it is also available on the HRWeb I can refer to it any time:

Policy Title : Dress Code Policy
Revision No : 01
Effective Date : June 13, 2022

I acknowledge that signing this document is a confirmation that I understand and agree with what is expected of me as iPloy employee with respect to the Dress Code Policy and I will abide by the provisions (including changes and additions which are deemed incorporated herein) of this policy.



JELICA L. OSORIO
Employee Name and Signature

July 29, 2024
Date

Noted:

Onboarding Specialist Name and Signature

Date

iPloy Gift Policy

The aim of this policy is to establish a uniformity relating to the acceptance of gifts, including gratuities and rewards. This policy applies to employees of the company. Employees include all permanent, part-time, temporary and probationary status.

"Gift" means any bestowal of money, any item of value, service, loan, thing or promise, discount or rebate for which something of equal or greater value is not exchanged. Payments for travel, entertainment and food are also considered as gifts.

Employees are required NOT to solicit or accept for personal benefit directly or indirectly any gift from any employee/s or company that is seeking to conduct or is currently conducting business with the Company. Any gift with a substantial monetary value of more than Php200 should be returned to the giver.

Any violations will be subject to the iPloy Code of Conduct and Discipline. Infractions for this policy is tagged under Level 2 offense and follow these progression:

- a. 1st Instance – Written Warning
- b. 2nd Instance- Final Written Warning
- c. 3rd Instance- Dismissal

If in doubt, employees should with management on the appropriateness of any gift exchange.

Employee Acknowledgement

I have read, understand and agree to comply with the foregoing policies, rules and conditions governing the iPloy Gift Policy.

Name: JELAICA TOGUEO

Signature: _____



Date: July 26, 2025

iPloy Social Media Policy

iPloy recognizes that employees use social media tools as part of their daily lives. Employees should always be mindful of what they are posting, who can see it, and how it can be linked back to the organization and work colleagues.

All employees should be aware that iPloy regularly monitors the internet and social media about its work and to keep abreast of general internet commentary, brand presence and industry/customer perceptions. iPloy does not specifically monitor social media sites for employee content on an ongoing basis, however employees should not expect privacy in this regard. iPloy reserves the right to utilize for disciplinary purposes any information that could have a negative effect on the company or its employees, which management comes across in regular internet monitoring, or is brought to the organization's attention by employees, customers, members of the public, etc.

All employees are prohibited from using or publishing information on any social media sites, where such use has the potential to negatively affect iPloy or its staff. Examples of such behavior include, but are not limited to:

- Publishing material that is defamatory, abusive or offensive in relation to any employee, manager, office holder, shareholder, customer or client of the company;
- Publishing any confidential or business-sensitive information about iPloy;
- Publishing material that might reasonably be expected to have the effect of damaging the reputation or professional standing of the company.

Procedure:

All employees must adhere to the following when engaging in social media.

- Be aware of your association with the company when using online social networks. You must always identify yourself and your role if you mention or comment on the company. Where you identify yourself as an employee, ensure your profile and related content is consistent with how you would present yourself with colleagues and clients. You must write in the first person and state clearly that the views expressed are your own and not those of iPloy. Wherever practical, you must use a disclaimer saying that while you work for the company, anything you publish is your opinion, and not necessarily the opinions of the company.
- You are personally responsible for what you post or publish on social media sites. Where it is found that any information breaches any policy, such as breaching confidentiality or bringing the company into disrepute, you may face disciplinary action up to and including dismissal.

A handwritten signature in black ink, appearing to read 'L. J. Jones', enclosed within a large, loopy circular scribble.

- Be aware of data protection rules – you must not post colleagues' details or pictures without their individual permission. Employees must not provide or use their company password in response to any internet request for a password.
- Material in which the company has a proprietary interest – such as software, products, documentation or other internal information – must not be transmitted, sold or otherwise divulged, unless the company has already released the information into the public domain. Any departure from this policy requires the prior written authorization of the management.
- Be respectful always, in both the content and tone of what you say. Show respect to your audience, your colleagues and customers and suppliers. Do not post or publish any comments or content relating to the company or its employees, which would be unacceptable in the workplace or in conflict with the company's website. Make sure the views and opinions you express are your own.
- Recommendations, references or comments relating to professional attributes, are not permitted to be made about employees, former employees, customers or suppliers on social media and networking sites. Such recommendations can give the impression that the recommendation is a reference on behalf of the IPloy, even when a disclaimer is placed on such a comment. Any request for such a recommendation should be dealt with by stating that this is not permitted in line with company policy and that a formal reference can be sought through HR, in line with the normal reference policy.
- Once in the public domain, content cannot be retracted. Therefore, always take time to review your content in an objective manner before uploading. If in doubt, ask someone to review it for you. Think through the consequences of what you say and what could happen if one of your colleagues had to defend your comments to a customer.
- If you make a mistake, be the first to point it out and correct it quickly. You may factually point out misrepresentations, but do not create an argument.
- This policy extends to future developments in internet capability and social media usage.

In addition to the above rules, there are many key guiding principles that employees should note when using social media tools:

- Always remember on-line content is never completely private;
- Regularly review your privacy settings on social media platforms to ensure they provide you with sufficient personal protection and limit access by others;
- Consider all online information with caution as there is no quality control process on the internet and a considerable amount of information may be inaccurate or misleading; and



A handwritten signature in black ink, enclosed within a hand-drawn oval. The signature is stylized and appears to read 'Alain J. J. J.' or similar.

- At all times respect copyright and intellectual property rights of information you encounter on the internet. This may require obtaining appropriate permission to make use of information. You must always give proper credit to the source of the information used.

Specific Managerial Responsibilities

By their position, Managers have obligations with respect to general content posted on social media. Managers should consider whether personal thoughts they publish may be misunderstood as expressing the company's opinions or positions even where disclaimers are used. Managers should err on the side of caution and should assume that their teams will read what is written. A public online forum is not the place to communicate company policies, strategies or opinions to employees.

Enforcement / Progression

Non-compliance with the general principles and conditions of this social media policy and the related internet, e-mail and confidentiality policies may lead to disciplinary action, up to and including dismissal. This policy is not exhaustive. In situations that are not expressly governed by this policy, you must ensure that your use of social media and the internet is always appropriate and consistent with your responsibilities towards the company. In case of any doubt, you should consult with your manager.

Infractions for this policy is tagged under Level 2 offense and follow these progression:

- 1st Instance – Written Warning
- 2nd Instance- Final Written Warning
- 3rd Instance- Dismissal

Employee Acknowledgement

I have read, understand and agree to comply with the foregoing policies, rules and conditions governing the use of all property of iPloy and all work and conduct completed on or with the assistance of iPloy property. Further, I agree to abide by the Social Media Best Practices when using social media sites on my personal time and when my affiliation with iPloy regarding those sites is known, identified, expected or presumed.

Name: JELICA A. TOQUIRO

Signature:  Date: July 26, 2024

Date : February 22, 2018
To : ALL EMPLOYEES CONCERNED
From : Human Resources
Thru : Operations Manager
Subject : WORKPLACE POLICY AND PROGRAM ON HIV/AIDS

1. OBJECTIVE

- 1.1. In conformity with Republic Act No. 8504 otherwise known as the Philippine AIDS Prevention and Control Act of 1998 which recognizes workplace-based programs as a potent tool in addressing HIV/AIDS as an international pandemic problem, this company policy is hereby issued for the information and guidance of the employees in the diagnosis, treatment and prevention of HIV/AIDS in the workplace.
- 1.2. This policy is also aimed at addressing the stigma attached to HIV/AIDS and ensures that the workers' right against discrimination and confidentiality is maintained.

2. COVERAGE

- 2.1. This Program shall apply to all employees regardless of their employment status.

3. IMPLEMENTING STRUCTURE

- 3.1. Iploy Inc. HIV/AIDS Program shall be managed by its health and safety committee consists of representatives from the different divisions and departments.

4. POLICY STATEMENT

4.1. BASIC INFORMATION ON HIV/AIDS

4.1.1. What is HIV/AIDS?

- 4.1.1.1. It is a disease caused by a virus called HIV (Human Immunodeficiency Virus). This virus slowly weakens a person's ability to fight off other diseases by attaching itself to and destroying important cells that control and support the human immune system.

4.1.2. How HIV/AIDS is transmitted?

- 4.1.2.1. Unprotected sex with an HIV infected person;



- 4.1.2.2. From an infected mother to her child (during pregnancy, at birth through breast feeding);
- 4.1.2.3. Intravenous drug use with contaminated needles;
- 4.1.2.4. Transfusion with infected blood and blood products; and
- 4.1.2.5. Unsafe, unprotected contact with infected blood and bleeding wounds of an infected person.

4.1.3. Is there a cure?

- 4.1.3.1. No. However, there are antiretroviral drug combinations that are available when properly used, result in prolonged survival of people with HIV. Holistic care of people living with HIV-AIDS and comprehensive treatment of opportunistic infections also dramatically improve quality of life.

5. GUIDELINES

5.1. Preventive Strategies

5.1.1. Conduct of HIV-AIDS Education.

5.1.1.1. Who will conduct?

The Medical Clinic of Iploy Inc. in coordination with the Health and Safety Committee shall conduct HIV-AIDS education to all employees for free. This shall also form part of the orientation of newly hired employees. The standardized information package developed by the Department of Labor and Employment (DOLE) may be used for this purpose.

5.1.1.2. How will it be conducted?

The HIV-AIDS education will be conducted through distribution and posting of IEC materials, lectures, counselling and training and information on adherence to standard or universal precautions in the workplace

5.1.2. Screening, Diagnosis, Treatment and Referral to Health Care Services

5.1.2.1. Screening for HIV as a prerequisite to employment is not mandatory.

5.1.2.2. The company shall encourage positive health seeking behavior through Voluntary Counseling and Testing.



5.1.2.3. The company shall establish a referral system and provide access to diagnostic and treatment services for its workers. Referral to Social Hygiene Clinics of LGU for HIV screening shall be facilitated by the company's medical clinic staff.

5.1.2.4. The company shall likewise facilitate access to livelihood assistance for the affected employee and his/her families, being offered by other government agencies.

6. SOCIAL POLICY

6.1. Non-discriminatory Policy and Practices

6.1.1. Discrimination in any form from pre-employment to post-employment, including hiring, promotion or assignment, termination of employment based on the actual, perceived or suspected HIV status of an individual is prohibited.

6.1.2. Workplace management of sick employees shall not differ from that of any other illness.

6.1.3. Discriminatory act done by an officer or an employee against their co-officer or co-employee shall likewise be penalized.

6.2. Confidentiality/Non-Disclosure Policy

6.2.1. Access to personal data relating to a worker's HIV status shall be bound by the rules of confidentiality consistent with provisions of R.A. 8504 and the ILO Code of Practice.

6.2.2. Job applicants and workers shall not be compelled to disclose their HIV/AIDS status and other related medical information.

6.2.3. Co-employees shall not be obliged to reveal any personal information relating to the HIV/AIDS status of fellow workers.

6.3. Work-Accommodation and Arrangement

6.3.1. The company shall take measures to reasonably accommodate employees with AIDS related illnesses.

6.3.2. Agreements made between the company and employee's representatives shall reflect measures that will support workers with HIV/AIDS through flexible leave arrangements, rescheduling of working time and arrangement for return to work.



7. ROLES AND RESPONSIBILITIES OF EMPLOYERS AND EMPLOYEES

7.1. Employer's Responsibilities

- 7.1.1. The Company, together with employees/ labor organizations, company focal personnel for human resources, safety and health personnel shall develop, implement, monitor and evaluate the workplace policy and program on HIV/AIDS.
- 7.1.2. Provide information, education and training on HIV/AIDS for its workforce.
- 7.1.3. Ensure non-discriminatory practices in the workplace and that the policy and program adheres to existing legislations and guidelines.
- 7.1.4. Ensure confidentiality of the health status of its employees and the access to medical records is limited to authorized personnel.
- 7.1.5. The Company, through its Human Resources Department, shall see to it that their company policy and program is adequately funded and made known to all employees.
- 7.1.6. The Health and Safety Committee, together with employees/ labor organizations shall jointly review the policy and program and continue to improve these by networking with government and organizations promoting HIV prevention.

7.2. Employees' Responsibilities

- 7.2.1. The employee's organization shall undertake an active role in educating and training their members on HIV prevention and control. Promote and practice a healthy lifestyle with emphasis on avoiding high risk behavior and other risk factors that expose workers to increased risk of HIV infection.
- 7.2.2. Employees shall practice non-discriminatory acts against co-employees.
- 7.2.3. Employees and their organization shall not have access to personnel data relating to a worker's HIV status.
- 7.2.4. Employees shall comply with universal precaution and preventive measures.



8. IMPLEMENTATION AND MONITORING

8.1. The Safety and Health Committee or its counterpart shall periodically monitor and evaluate the implementation of this Policy and Program.

9. EFFECTIVITY

9.1. This Policy shall take place effective immediately and shall be made known to every employee.


Prepared by: Jo Hanna R. Melecio
Human Resources


Reviewed by: Alfredo P. Camarillo Jr.
Director of Operations

Approved by: Yisroel Y. Gissinger
CEO



Date : January 1, 2018
To : ALL EMPLOYEES CONCERNED
From : Human Resources
Thru : Operations Manager
Subject : WORKPLACE POLICY AND PROGRAM ON TUBERCULOSIS (TB) PREVENTION AND CONTROL

1. OBJECTIVE

- 1.1. To assist the government in its campaign against Tuberculosis (TB) in compliance with the Department of Labor and Employment's Department Order No. 73-05, series of 2005 – Guidelines for the Implementation of Policy and Program on Tuberculosis (TB) Prevention and Control in the Workplace.
- 1.2. To provide initiatives to prevent the outbreak and spread of tuberculosis in the workplace, and to treat, care, and support employees who become afflicted with tuberculosis.

2. COVERAGE

- 2.1. This Program shall apply to all employees regardless of their employment status.

3. POLICY STATEMENT

- 3.1. The company seeks the prevention of the spread of tuberculosis, as well as the treatment, rehabilitation, and restoration to work of employees who contract this disease. To achieve this goal, all employees are strictly mandated to undergo an annual physical examination with the requisite chest x-ray.
- 3.2. Also, in line with this, a TB awareness program shall be undertaken through information dissemination, which shall include its nature, frequency (occurrence in a selected population) and transmission, treatment with Directly Observed Treatment Short Course (DOTS), and control and management of TB in the workplace. This shall be handled by the Office of Health Services (Infirmary) or the partner health provider of IPLOY INC. in conjunction with the Operations Manager and office of Human Resource through the company's accredited health provider.
- 3.3. The DOTS is a comprehensive strategy to control TB, and is composed of five components, which are:
 - 3.3.1. Political will or commitment to enduring sustained and quality TB treatment and control activities;
 - 3.3.2. Case detection by sputum-smear microscopy among symptomatic patients;



- 3.3.3. Standard short-course chemotherapy using regimens of 6 to 8 months for all confirmed active TB cases (i.e., smear positive or those validated by the TB Diagnostic Committee). Complete drug taking through direct observation by a designated treatment partner, during the whole course of the treatment regimen;
 - 3.3.4. A regular, uninterrupted supply of all anti-tuberculosis drugs and other materials;
 - 3.3.5. A standard recording and reporting system that allows assessment of case finding and treatment outcomes for each patient and of tuberculosis control program's performance overall
- 3.4. Employees must be given proper information on ways of strengthening their immune responses against TB infection, i.e., information on good nutrition, adequate rest, avoidance of tobacco and alcohol, and good personal hygiene practices. However, it should be underscored that intensive efforts in the prevention of the spread of the disease must be geared towards accurate information on its etiology and complete performance overall.
- 3.5. Improving workplace conditions:
- 3.5.1. To ensure that contamination from TB airborne particles is controlled, workplaces must provide adequate and appropriate ventilation (DOLE-Occupational Safety and Health Standards, OSHS, Rule 1076.01) and there shall be adequate sanitary facilities for workers.
 - 3.5.2. The number of employees in a work area shall not exceed the required number for a specified area and shall observe the standard for space requirement. (OSHS Rule 1062)
- 3.6. Capability building on TB awareness raising and training on TB case Finding, Case Holding, Reporting and Recording of cases and the implementation of DOTS shall be given to Company health personnel or the occupational safety and health committee.
- 3.7. Social Policies:
- 3.7.1. Non-discrimination: Employees who have or had TB shall not be discriminated against. Instead, they shall be supported with adequate diagnosis and treatment, and shall be entitled to work for as long as they are certified by the Company's accredited health provider as medically fit and shall be restored to work as soon as their illness is controlled.
 - 3.7.2. Work Accommodation: Through agreements made between the management and the employees, work accommodation measures to support employees with TB is encouraged through flexible leave arrangements, rescheduling of working times, and arrangements for return to work.



3.7.3. Restoration to Work: The employee may be allowed to return to work with reasonable working arrangements as determined by the Company's Health Care Provider and/or the DOTS provider.

3.8. Employee Responsibility:

3.8.1. Employees who have symptoms of TB shall immediately seek assistance from the Company's Health Services Provider.

3.8.1.1. An employee who has the symptoms of TB is required to initially wear a face mask (especially while inside the office) and observe good hygiene practices, at least until declared by a competent medical practitioner to be safe from transmission.

3.8.1.2. Similarly, for those at risk, i.e., those with family members with TB or those exposed to a co-employee with TB, it would be prudent to observe the same good hygiene practices until declared free from the disease and safe from transmission.

3.8.2. Once diagnosed to be with TB, employees shall immediately seek treatment either through the Department of Health's DOTS or a private physician of the employee's choice. However, it is imperative that the one strictly adheres to the course of treatment. Failing to dutifully observe the treatment course may give rise to complications, such as resistance or even the failure of treatment, which may make it harder to treat the infection and result in a longer absence.

3.8.2.1. An absence from work due to medical reasons of over six (6) months may result in the termination of one's employment as provided for by the Labor Code of the Philippines under Art. 284 – Disease as Ground for Termination.

3.8.3. Employees are required to undergo an annual compulsory chest X-ray through the Annual Physical Examination. If for any reason an employee fails to secure a chest x-ray at that time, he/she shall be directed to secure a chest x-ray at an accredited clinic by his/her respective Infirmary/Health Services.

3.9. The Company shall ensure that any TB occurrence in the workplace is traced and that all contacts are clinically assessed, as much as feasible.

3.10. An employee afflicted with TB, who has voluntarily undergone the treatment and rehabilitation program (DOTS) prescribed, and who is finally declared to be in a non-communicable stage, may be allowed back to work subject to being given a medical clearance by a Company designated physician.

3.11. Employees (those afflicted with the disease or those identified under contact tracing) who refuse to cooperate and dutifully observe lawful



instructions (undergo a medical check-up and/or treatment), may be subject to disciplinary action proceedings for insubordination (the penalty of which may range up to the termination of one's employment).

4. PROCEDURE

- 4.1. The respective Health Services of the Company (and/or the contracted Health Services Provider) shall coordinate with the Occupational Safety and Health Center who shall provide preventive and technical assistance in the implementation of the Workplace TB Control and Management Program.
- 4.2. An employee who undergoes the Annual Physical Examination with the requisite chest x-ray will have his/her medical record forwarded to company clinic/HRD. Employees who fail to undergo the requisite annual chest x-ray shall be directed to secure one at an accredited clinic or by his/her preferred Infirmary/Health Services.
 - 4.2.1. Those with medical findings shall be required to undergo further medical check-up. All medical records in connection with this second/ further check-up shall be submitted to company clinic/HRD and his/her respective Infirmary/Health Services.
 - 4.2.2. The employee shall then coordinate with company clinic/HRD and his/her respective Infirmary/Health Services for the next steps.
- 4.3. An employee who is suspected to be afflicted with TB, whether as a direct suspect or by contact tracing, shall cooperate fully with his/her respective Infirmary/Health Services (and/or the contracted Health Services provider). If the employee tests positive for TB, the employee shall undergo the DOTS program to its completion.
- 4.4. If the employee needs to undergo a leave of absence to recuperate, he/she will be allowed to use the appropriate leave before he/she may request to be permitted to go on a Leave of Absence without Pay (LOA).
 - 4.4.1. The employee shall observe the requisite procedure in applying for a leave.
 - 4.4.2. The Unit concerned shall ensure that the requisite procedures are observed by the employee and that the company clinic is duly informed.
- 4.5. An employee may be allowed to go on a medical leave of absence (without pay) for a maximum period of six (6) months. The concerned employee shall submit an application for a leave of absence before going on leave. Said leave application shall be subject to approval at the sole discretion of the Company Management.
 - 4.5.1. The same procedures under 4.2.1 to 4.2.2 shall be observed.



- 4.6. After treatment, with a maximum period of six (6) months on leave (without pay), an employee found to be cured or in a non-communicable stage of TB may be allowed back to work, provided that the employee's health shall continue to be monitored during the annual physical examination with the requisite chest x-ray or as may be deemed necessary by the Unit Health Services (Infirmary) or contracted Health Services provider.
- 4.7. The employee returning to work shall be required by the Management to secure a medical clearance from a medical doctor chosen by the Company before being allowed to return to work.
- 4.8. The HRD will initiate disciplinary proceedings against any employee found to have discontinued treatment in defiance of medical advice, or who refuses to undergo the full treatment course prescribed. Likewise, employees who are ordered to undergo a check-up due to contact tracing but refuse to do so will also face disciplinary action proceedings. In both cases, the maximum sanction applicable for insubordination will be the termination of one's employment, if it is deemed warranted.

5. IMPLEMENTATION AND MONITORING

- 5.1. The Safety and Health Committee or its counterpart shall periodically monitor and evaluate the implementation of this Policy and Program.

6. EFFECTIVITY

- 6.1. This Policy shall take place effective immediately and shall be made known to every employee.

Prepared by: 
Jo Hanna R. Melecio
Human Resources

Reviewed by: 
Alfredo P. Cumarillo Jr.
Director of Operations

Approved by: Yisroel Y. Gissinger
CEO



Date : February 22, 2018
To : ALL EMPLOYEES CONCERNED
From : Human Resources
Thru : Operations Manager
Subject : WORKPLACE POLICY AND PROGRAM ON HEPATITIS B

1. OBJECTIVE

- 1.1. Iploy Inc. is committed to conform to the established standards assurance of customer satisfaction, protection of our environment and health and safety in the workplaces.
- 1.2. The company promotes and ensures a healthy environment through its various health programs to safeguard its employees. And as part of the company's compliance to DOLE Department Advisory No. 05, Series of 2010 (Guidelines for the Implementation of a Workplace Policy and Program on Hepatitis B), this Program has been developed. This program is aimed to address the stigma attached to hepatitis B and to ensure that the employees' right against discrimination and confidentiality is maintained.
- 1.3. This guideline is formulated for everybody's information and reference for the diagnosis, treatment, and prevention of Hepatitis B. This will inform the employees of their role as well as the company in dealing with Hepatitis B. A healthy environment encompasses a good working relationship and great output for continuous business growth.

2. COVERAGE

- 2.1. This Program shall apply to all employees regardless of their employment status.

3. POLICY STATEMENT

3.1. Implementing Structure

- 3.1.1. Iploy Inc. Hepatitis B workplace policy and program shall be managed by its health and safety committee. Each division or department of the Company shall be duly represented.

3.2. Guidelines

3.2.1. Education

- 3.2.1.1. Hepatitis B shall be conducted through distribution and posting of IEC materials and counseling and/ or lectures; and



3.2.1.2. Hepatitis B education shall be spearheaded by Iploy Inc. Medical Clinic in close coordination with the health and safety committee.

3.2.2. Preventive Strategies

3.2.2.1. All employees are encouraged to be immunized against Hepatitis B after securing clearance from their physician.

3.2.2.2. Workplace sanitation and proper waste management and disposal shall be monitored by the health and safety committee on a regular basis.

3.2.2.3. Personal protective equipment shall be made available at all times for all employees; and

3.2.2.4. Employees will be given training and information on adherence to standards or universal precautions in the workplace.

4. SOCIAL POLICY

4.1.1.1. Non-discriminatory Policy and Practices

4.1.1.1.1. There shall be no discrimination of any form against employees on the basis of their Hepatitis B status consistent with the international agreements on non-discrimination ratified by the Philippines (ILO C111). Employees shall not be discriminated against, from pre to post employment, including hiring, promotion, or assignment because of their hepatitis B status.

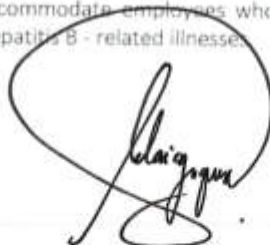
4.1.1.1.2. Workplace management of sick employees shall not differ from that of any other illness. Persons with Hepatitis B related illnesses may work for as long as they are medically fit to work.

4.1.1.2. Confidentiality

4.1.1.2.1. Job applicants and employees shall not be compelled to disclose their Hepatitis B status and other related medical information. Co-employees shall not be obliged to reveal any personal information about their fellow employees. Access to personal data relating to employee's Hepatitis B status shall be bound by the rules on confidentiality and shall be strictly limited to medical personnel or if legally required.

4.1.1.3. Work-Accommodation and Arrangement

4.1.1.3.1. The company shall take measures to reasonably accommodate employees who are Hepatitis B positive or with Hepatitis B - related illnesses.



- 4.1.1.3.2. Through agreements made between management and employees' representative, measures to support employees with Hepatitis B are encouraged to work through flexible leave arrangements, rescheduling of working time and arrangement for return to work.
- 4.1.1.4. Screening, Diagnosis, Treatment and Referral to Health Care Services
 - 4.1.1.4.1. The company shall establish a referral system and provide access to diagnostic and treatment services for its employees for appropriate medical evaluation/ monitoring and management.
 - 4.1.1.4.2. Adherence to the guidelines for healthcare providers on the evaluation of Hepatitis B positive employees is highly encouraged.
 - 4.1.1.4.3. Screening for Hepatitis B as a prerequisite to employment shall not be mandatory.
- 4.1.1.5. Compensation
 - 4.1.1.5.1. The company shall provide access to Social Security System and Employees Compensation benefits under PD 626 to an employee contracted with Hepatitis B infection in the performance of his duty.

5. ROLES AND RESPONSIBILITIES OF EMPLOYERS AND EMPLOYEES

- 5.1.1.1. Employer's Responsibilities
 - 5.1.1.1.1. Management, together with employees' organizations, company focal personnel for human resources, and safety and health personnel shall develop, implement, monitor and evaluate the workplace policy and program on Hepatitis B.
 - 5.1.1.1.2. The Health and Safety Committee shall ensure that their company policy and program is adequately funded and made known to all employees.
 - 5.1.1.1.3. The Human Resources Department shall ensure that their policy and program adhere to existing legislations and guidelines, including provisions on leaves, benefits and insurance.
 - 5.1.1.1.4. Management shall provide information, education and training on Hepatitis B for its workforce consistent with the standardized basic information package developed by the Hepatitis B TWG; if not available within the establishment, then provide access to information



- 5.1.1.1.5. The company shall ensure non-discriminatory practices in the workplace.
- 5.1.1.1.6. The management together with the company focal personnel for human resources and safety and health shall provide appropriate personal protective equipment to prevent Hepatitis B exposure, especially for employees exposed to potentially contaminated blood or body fluid.
- 5.1.1.1.7. The Health and Safety Committee, together with the employees' organizations shall jointly review the policy and program for effectiveness and continue to improve these by networking with government and organizations promoting Hepatitis B prevention.
- 5.1.1.1.8. The company shall ensure confidentiality of the health status of its employees, including those with Hepatitis B.
- 5.1.1.1.9. The human resources shall ensure that access to medical records is limited to authorized personnel.
- 5.1.1.2. Employees Responsibilities
- 5.1.1.2.1. The employees' organization is required to undertake an active role in educating and training their members on Hepatitis B prevention and control. The IEC program must also aim at promoting and practicing a healthy lifestyle with emphasis on avoiding high risk behavior and other risk factors that expose employees to increased risk of Hepatitis B infection, consistent with the standardized basic information package developed by the Hepatitis B TWG.
- 5.1.1.2.2. Employees shall practice non-discriminatory acts against co-employees on the ground of Hepatitis B status.
- 5.1.1.2.3. Employees and their organizations shall not have access to personnel data relating to an employee's Hepatitis B status. The rules of confidentiality shall apply in carrying out union and organization functions.
- 5.1.1.2.4. Employees shall comply with the universal precaution and the preventive measures.
- 5.1.1.2.5. Employees with Hepatitis B may inform the health care provider or the company physician on their Hepatitis B status, that is, if their work activities may increase the risk of Hepatitis B infection and transmission or put the Hepatitis B positive at risk for aggravation.



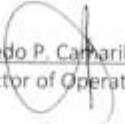
6. IMPLEMENTATION AND MONITORING

6.1. Within the establishment, the implementation of the policy and program shall be monitored and evaluated periodically. The safety and health committee or its counterpart shall be tasked for this purpose.

7. EFFECTIVITY

7.1. This Policy shall take place effective immediately and shall be made known to every employee.

Prepared by: 
Jo Hanna R. Melecio
Human Resources

Reviewed by: 
Alfredo P. Canarillo Jr.
Director of Operations

Approved by: Yisroel Y. Gissinger
CEO



Date : January 1, 2018
To : ALL EMPLOYEES CONCERNED
From : Human Resources
Thru : Operations Manager
Subject : DRUG-FREE WORKPLACE POLICY AND PROGRAM

1. OBJECTIVE

- 1.1. In compliance with Article V of Republic Act No. 9165, otherwise known as the Comprehensive Dangerous Drugs Act of 2002, and its Implementing Rules and Regulations and DOLE Department Order No. 53-03, series of 2003 (Guidelines for the Implementation of a Drug-Free Workplace Policies and Programs for the Private Sector), iPloy Inc. hereby adopts the following policies and programs to achieve a drug-free workplace;
- 1.2. Company policy is to maintain a workplace free of illegal drugs. To ensure that the objectives of the company's corporate policy are met, the company is implementing this drug-free program. The program will have the following elements:

2. COVERAGE

- 2.1. This Program shall apply to all employees regardless of their employment status.

3. POLICY STATEMENT

- 3.1. The use, possession, solicitation for, or sale of dangerous drugs on company premises or while performing an assignment.
- 3.2. Being impaired or under the influence of dangerous drugs away from the company, if such impairment or influence adversely affects the employee's work performance, the safety of the employee or of others, or puts at risk the company's reputation.
- 3.3. Possession, use, solicitation for, or sale of dangerous drugs away from the company premises, if such activity or involvement adversely affects the employee's work performance, the safety of the employee or of others, or puts at risk the company's reputation.
- 3.4. The presence of any detectable amount of dangerous drugs in the employee's system while at work, while on the premises of the company, or while on company business. "Dangerous Drugs" include those listed in the Schedules annexed to the 1961 Single Convention on Narcotic Drugs, as amended by the 1972 Protocol, and in the Schedules annexed to the 1971



Single Convention on Psychotropic Substances as enumerated in the attached annex of R.A. 9165.

4. MANDATORY DRUG TEST

- 4.1. To ensure that only those qualified shall be screened and recruited to prevent the detrimental effects (e.g. *lower productivity; poor decision making; increased accidents; more compensation claims; and reduced team effort*) which drug use and abuse may cause in the workplace, the conduct of mandatory drug test shall be required for pre-employment.
- 4.2. Iploy Inc. designates company accredited or affiliated center, a duly accredited drug testing center by the Department of Health (DOH), as its authorized drug testing laboratory.
- 4.3. The Company may also conduct drug testing under any of the following circumstances:
 - 4.3.1. **RANDOM TESTING:** Officer/employees may be selected at random for drug testing at any interval determined by the Company.
 - 4.3.2. **FOR-CAUSE TESTING:** The company may ask an officer/employee to submit to a drug test at any time it feels that the employee may be under the influence of drugs, including, but not limited to, the following circumstances: evidence of drugs on or about the employee's person or in the employee's vicinity, unusual conduct on the employee's part that suggests impairment or influence of drugs, negative performance patterns, or excessive and unexplained absenteeism or tardiness.
 - 4.3.3. **POST-ACCIDENT TESTING:** Any officer/employee involved in a "Near-Miss" incident or "Work Accident" under circumstances that suggest possible use or influence of drugs may be asked to submit to a drug test. As defined herein, "Near-Miss" means an incident arising from or in the course of work which could have led to injuries or fatalities of the workers and/or considerable damage to the employer had it not been curtailed. "Work Accident" refers to unplanned or unexpected occurrence that may or may not result in personal injury, property damage, work stoppage or interference or any combination thereof which arises out of and in the course of employment.
 - 4.3.4. All drug tests shall employ, among others, two (2) testing methods, the screening test which will determine the positive result as well as the type of the drug used and the confirmatory test which will confirm a positive screening test. Where the confirmatory test turns positive, the company's Assessment Team shall evaluate the results and determine



the level of care and administrative interventions that can be extended to the concerned employee.

4.3.5. Iploy Inc. shall inform the officer/employee who was subjected to a drug test of the test-results whether positive or negative.

4.3.6. All costs of drug testing shall be borne by Iploy Inc.

5. TREATMENT, REHABILITATION, AND REFERRAL

5.1. An officer/employee who, for the first time, is found positive of drug use, shall be referred for treatment and/or rehabilitation in a DOH accredited center. For this purpose, Iploy Inc. shall provide a list of at least three (3) accredited facilities which an employee who was tested positive for drugs may choose from.

5.2. Following rehabilitation, the company's Assessment Team, in consultation with the head of the rehabilitation center, shall evaluate the status of the drug dependent employee and recommend to the employer the resumption of the employee's job if he/she poses no serious danger to his/her co-employees and/or the workplace.

5.3. All costs for the treatment and rehabilitation of the drug dependent employee shall be charged to his account. The period during which the employee is under treatment or rehabilitation shall be considered as authorized leaves.

5.4. Repeated drug use even after ample opportunity for treatment and rehabilitation shall be dealt with the corresponding penalties under R.A. 9165 and is a ground for dismissal.

6. ADVOCACY, EDUCATION AND TRAINING

6.1. Iploy Inc. undertakes to increase the awareness and education of its officers and employees on the adverse effects of dangerous drugs through continuous advocacy, education and training programs/activities to all its officers and employees.

6.2. All officers and employees are required to undergo an orientation/education program before assumption of their respective duties. The program shall include the following topics:

6.2.1. Salient features of R.A. 9165;

6.2.2. Adverse effects of abuse and/or misuse of dangerous drugs on the person, workplace, family and the community;



6.2.3. Preventive measures against drug abuse; and

6.2.4. Steps to take when intervention is needed, as well as available services for treatment and rehabilitation.

6.3. To encourage all officers and employees to lead a healthy lifestyle while at work and at home, Iploy Inc. undertakes to conduct the following activities as often as possible:

6.3.1. Lifestyle assessment programs on health nutrition, weight management, stress management, alcohol abuse, smoking cessation, and other indicators of risk diseases;

6.3.2. Health wellness screenings (*e.g. blood pressure and heart rate, cholesterol test, blood glucose, etc.*);

6.3.3. Sports, recreational and fun-game activities; and

6.3.4. Other activities promoting health and wellness.

7. ROLES, RIGHTS AND RESPONSIBILITIES OF EMPLOYER AND EMPLOYEES

7.1. Iploy Inc. shall ensure that the workplace policies and programs on the prevention and control of dangerous drugs, including drug testing, shall be disseminated to all officers and employees. The employer shall obtain a written acknowledgement from the employees that the policy has been read and understood by them.

7.2. Iploy Inc. shall maintain the confidentiality of all information relating to drug tests or to the identification of drug users in the workplace; exceptions may be made only where required by law, in case of overriding public health and safety concerns; or where such exceptions have been authorized in writing by the person concerned.

7.3. All officers and employees shall enjoy the right to due process, absence of which will render the referral procedure ineffective.

8. CONSEQUENCES OF POLICY VIOLATIONS

8.1. Any officer or employee who uses, possesses, distributes, sells or attempts to sell, tolerates, or transfers dangerous drugs or otherwise commits other unlawful acts as defined under Article II of RA 9165 and its Implementing Rules and Regulations shall be subject to the pertinent provisions of the said Act.

8.2. Any officer or employee found positive for use of dangerous drugs shall be dealt with administratively in accordance with the provisions of Article 282 of Book VI of the Labor Code and under RA 9165.



9. IMPLEMENTATION AND MONITORING

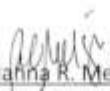
9.1.1. The implementation of these policies and programs shall be monitored and evaluated periodically by management to ensure a drug-free workplace. For this purpose, an Assessment Team shall be constituted in accordance with D.O. 53-03.

10. EFFECTIVITY

10.1. This Policy shall take place effective immediately and shall be made known to every employee.

11. ATTACHEMENT

11.1. Drug-Free Workplace Policy and Program Acknowledgement

Prepared by: 
Jo Hanna R. Melecio
Human Resources

Reviewed by: 
Alfredo P. Camarillo Jr.
Director of Operations

Approved by: Yisroel Y. Gissinger
CEO



Drug-Free Workplace Program Acknowledgement

I hereby acknowledge that I have received and read Iploy Inc. Drug-Free Workplace Policy and Program, a summary of the drugs which may alter or affect a drug test and a list of local Employee Assistance Program providers or local drug and alcohol treatment programs. I have had an opportunity to have all aspects of this material fully explained. I also understand that I must abide by the Program as a condition of initial and/or continued employment, and any violation may result in disciplinary action up to and including termination.

I also understand that during my employment I may be required to submit to testing for the presence of drugs or alcohol in my body. I understand that submission to such testing is a condition of employment with [Company], and disciplinary action up to and including termination may result if:

- 1) I refuse to consent to testing.
- 2) I refuse to execute all forms of consent and release of liability that are usually and reasonably associated with such examinations.
- 3) I refuse to authorize release of the test results to the company.
- 4) The tests establish a violation of [Company]'s Drug-Free Workplace Policy.
- 5) I otherwise violate the policy.

I also recognize that the Drug-Free Workplace Policy and related documents are not intended to constitute a contract between Iploy Inc. and me.

The undersigned further states that he/she has read and understands the above acknowledgement and signs below of his/her own free will.



SIGNATURE

July 26, 2024

DATE

WITNESS

DATE

Date : January 1, 2018
To : ALL EMPLOYEES CONCERNED
From : Human Resources
Thru : Operations Manager
Subject : WORKPLACE POLICY AND PROGRAM ON ANTI-SEXUAL HARASSMENT

1. OBJECTIVE

1.1. The following policies and procedure are hereby issued by Iploy Inc. to prevent sexual harassment in its workplace and to provide the procedure for the resolution, settlement and/or disposition of sexual harassment cases.

2. COVERAGE

2.1. This Program shall apply to all employees regardless of their employment status.

3. POLICY STATEMENT

3.1. Iploy Inc. believes that employees should be afforded the opportunity to work in an environment free of sexual harassment. Sexual harassment is a form of misconduct that undermines the employment relationship. No employee, either male or female, should be subjected verbally or physically to unsolicited and unwelcome sexual overtures or conduct.

3.2. Sexual harassment refers to behavior that is not welcome, that is personally offensive, debilitates morale and, therefore, interferes with work effectiveness. Such behavior may be in the form of unwanted physical, verbal or visual sexual advances, requests for sexual favors, and other sexually oriented conduct which is offensive or objectionable to the recipient, including, but not limited to: epithets, derogatory or suggestive comments, slurs or gestures and offensive posters, cartoons, pictures, or drawings.

3.3. Iploy Inc. will not tolerate any behavior that amounts to sexual harassment and any officer or employee found to have committed sexual harassment shall be subjected to disciplinary action, up to and including dismissal.

3.4. DEFINITION OF SEXUAL HARASSMENT

Iploy Inc. has adopted, and its policy is based on, the definition of sexual harassment set forth in Section 3 of R.A. 7877. It provides that sexual harassment in workplace is committed by an employer, employee, manager, supervisor, agent of the employer, or any other person who, having authority, influence or moral ascendancy over another in a work environment, demands,



requires or otherwise requires any sexual favor from the other, regardless of whether the demand, requests or requirement for submission is accepted by the object of said Act.

In a work-related or employment environment, sexual harassment is committed when:

- 3.4.1. The sexual favor is made as a condition in the hiring or in the employment, re-employment, or continued employment of said individual, or in granting said individual favorable compensation, terms of conditions, promotions, or privileges; or the refusal to grant the sexual favor results in limiting, segregating or classifying the employee which in any way would discriminate, deprive or diminish employment opportunities or otherwise adversely affect said employee;
- 3.4.2. the above acts would impair the employees' rights or privileges under existing labor laws; or
- 3.4.3. the above acts would result in an intimidating, hostile, or offensive environment for the employee.

3.5. WHERE SEXUAL HARASSMENT IS COMMITTED

Sexual harassment may be committed in any work or training environment. It may include, but are not limited to the following:

- 3.5.1. In or outside the office building or training site;
- 3.5.2. at office or training-related social functions;
- 3.5.3. in the course of work assignments outside the office;
- 3.5.4. at work-related conferences, studies or training sessions; or
- 3.5.5. during work related travel.

3.6. FORMS OF SEXUAL HARASSMENT

Sexual harassment may be committed in any of the following forms:

- 3.6.1. Overt sexual advances;
- 3.6.2. Unwelcome or improper gestures of affection;
- 3.6.3. Request or demand for sexual favors including but not limited to going out on dates, outings, or the like for the same purpose;
- 3.6.4. Any other act or conduct of a sexual nature or for purposes of sexual gratification which is generally annoying, disgusting or offensive to the victim.



3.7. WHAT IS NOT SEXUAL HARASSMENT

Sexual harassment does not refer to occasional compliments of a socially acceptable nature. It refers to behavior that is not welcome, that is personally offensive, that debilitates morale, and that, therefore, interferes with work effectiveness.

3.8. EMPLOYER'S RESPONSIBILITY

iPloy Inc. undertakes to provide its officers and employees a work environment free of sexual harassment by management personnel, by co-workers and by others with whom officers and employees must interact in the course of their employment in iPloy Inc. Sexual harassment is specifically prohibited as unlawful and as a violation of company policy. The company is responsible for preventing sexual harassment in the workplace, for taking immediate corrective action to stop sexual harassment in the workplace and for promptly investigating any allegation of work-related sexual harassment.

4. PROCEDURE

4.1. COMPLAINT PROCEDURE

4.1.1. Any officer or employee, who experiences or witnesses any act of sexual harassment in the workplace, shall report the same immediately to the Committee on Decorum and Investigation. They may also report acts of sexual harassment to any other member of iPloy Inc. management or ownership. All allegations of sexual harassment will be quickly investigated. To the extent possible, the identity of the officer or employee shall remain confidential and that of any witnesses and the alleged harasser will be protected against unnecessary disclosure. When the investigation is completed, all parties will be informed of the outcome of the investigation.

4.1.2. A Committee on Decorum and Investigation shall be constituted and shall be composed of the management and the employees' representative to receive complaints, investigate and hear sexual harassment cases. The Committee shall develop its own rules in the settlement and disposition of sexual harassment cases. The Committee shall also develop and implement programs to increase understanding and awareness about sexual harassment.

4.2. RETALIATION

4.2.1. iPloy Inc. will permit no employment-based retaliation against anyone who brings a complaint of sexual harassment or who speaks as a witness in the investigation of a complaint of sexual harassment.



4.3. WRITTEN POLICY


4.3.1. All officers and employees of Iploy Inc. shall receive a copy of the company's sexual harassment policy upon assumption of their respective offices. If at any time an officer or employee would like another copy of the policy, please contact the Office of the Committee on Decorum. If Iploy Inc. should amend or modify its sexual harassment policy, all officers and employees will receive an individual copy of the amended or modified policy.

5. CONFIDENTIALITY

5.1. At the commencement of the investigation procedure at the Committee, starting from the filing of a written complaint, or the manifestation of an objection to an act or behavior, all matters discussed, documents reviewed, letters and correspondences read, and, testimonies heard, will be kept under the strictest confidence. It is the intention of Iploy Inc. that rights of the parties, especially the innocent ones, are protected. At the same time, however, dignity and honor shall be preserved for all the parties concerned by keeping all information gathered through the investigation process confidential at all times, even after the conclusion of the investigation proper.

6. EFFECTIVITY

6.1. This Policy shall take place effective immediately and shall be made known to every employee.


Prepared by: Jo Hanna R. Melecio
Human Resources


Reviewed by: Alfredo P. Camarillo Jr.
Director of Operations

Approved by: Yisroel Y. Gissinger
CEO



Iploy Inc.

COMPOSITION OF COMMITTEE ON DECORUM AND INVESTIGATION ON SEXUAL
HARRASMENT POLICY

	<u>Name</u>	<u>Position in Establishment</u>
Chairman:	Alfred Camarillo	Director of Operations
Secretary:	Abelardo Dagalea	Operations Manager
Members:	Jo Hanna Melecio Ma. Blesila Vestil Junamel Brigoli	HR Staff CSR - Phone CSR - Phone

Submitted by:

Yisroel Y. Gissinger
CEO



DATE : April 3, 2018
To : ALL EMPLOYEES
FROM : HUMAN RESOURCES DEPARTMENT
THRU : OPERATIONS MANAGEMENT
SUBJECT : MEMO: RESTROOM GUIDELINES

Iploy Inc. provides unisex restrooms available so that employees can use them when they need to do so. One is located inside the operation floor and second is in the hallway outside the operation floor. However, those who are uncomfortable, has issue with the unisex restroom, we have a separate single, private restroom available for use.

Moreover, any employee with concern/issue in using the unisex restroom, please visit Human Resources office to get door access pass. Office security, Log in and Log out procedure shall apply.

Furthermore, it is essential that all employees should comply and observe the restroom etiquette:

- Knock if the cubicle appears to be occupied. Don't peek under the doors.
- Lock the cubicle door when you enter.
- Stand close enough to the pan or urinal so you don't wet the seat, walls or floor
- Flush the toilet after use and wipe off the toilet seat for the next user
- Paper towels go in the trash can, not on the floor or in the toilet bowl
- Wash your hands to prevent the spread of colds and the flu
- Please use water and paper towels conservatively

For your information and guidance.


Jo Hanna Molecio
Human Resources

Noted by:


Alfredo Camarillo Jr.
Director, Operations


Retiring Officer


February 27, 2018

To : ALL EMPLOYEES
FROM : HUMAN RESOURCES DEPARTMENT
THRU : OPERATIONS MANAGER
SUBJECT : OFFICE SECURITY, LOG IN AND LOG OUT PROCEDURE

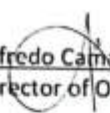
The following is issued to ensure the effective enforcement and strict observance of all employees on office attendance and punctuality
To ensure effective implementation and monitoring of office security

1. Employees are required to log in and log out using the biometric and the RF ID, even if the door is open
2. Employees are allowed to be inside the office and to Log in thirty (30) minutes before their scheduled time
3. Bags and/or personal items should be left in the locker before longing in/going inside the production area
4. Once an employee logged in and inside the production area, they can no longer go outside until their 1st break
5. Employees are only allowed to stay in the office for thirty (30) minutes after their shift, unless authorized or has approval to extend their time
6. Pantry, recreation room and locker should be closed at all times, employees must use their RF ID to access these rooms
7. No tailgating
8. Employee ID and RF ID should be worn at all times, lost RF IDs will be charge to the employee
9. No employees are allowed to stay in the waiting area for applicant.
10. Employees who left/lost their IDs will get temporary ID from HR and will be dealt with according to our code of conduct and discipline.
11. Submit self to magnetic wand scanning with the security personnel
12. Only water in a clear container is allowed in the operation area and recreation room

For guidance and strict compliance.


Jo Hanna Malecio
Human Resources

Noted by:


Alfredo Camarillo Jr.
Director of Operations



iPloy Incorporated
9th floor, Ayala Center Cebu Tower
Bohol Avenue, Cebu Business Park
Cebu City 6000



DATE : November 17, 2021
TO : ALL EMPLOYEES
FROM : HUMAN RESOURCES
SUBJECT : LOCKER POLICY

The aim of this policy is to guide our employees and establish a well-kept and orderly environment in the locker room.

Please see list of rules provided below for your reference.

RULES

- ONE LOCKER ONLY per employee. **NO sharing of lockers.**
- NO storing of perishable foods/leftovers inside the locker.
- Proper sanitation is strictly observed (E.G. No storing of unwashed containers/mugs/utensils, etc.)
- NO transferring of lockers. Transferring of lockers is subject to approval.
- Checking/audit will be done from time to time and once unassigned lockers are being used, they will be forced open, and the company will not be liable for padlock replacement nor reimbursement.
- Any sort of action that may result in damage to property is strictly prohibited. This includes but is not limited to graffiti/vandalism, posting of stickers, damage to facility property such as the forced opening of lockers without the management/HRs' knowledge or consent, etc.
- The company will not be liable for the loss or damage to any personal belongings left unattended and that includes, sharing of lockers, lockers without padlocks, placed on top of the lockers, etc.
- The company is not responsible for loss or missing items due to the owner's negligence.
- Forced Open Request due to lost padlock key or forgotten password/code should be submitted a day prior and will be subject to availability of the bolt cutter.
- Authorization to Forced Open a Locker, the request must be submitted via email to hr@iploy.com and must wait for the approval.
- NO LOITERING inside the locker room
- Unassigned Lockers with cable ties should not be opened.
- Things inside unassigned lockers will be subject to disposal of the management

This Memorandum shall take effect on November 22, 2021.

Failure to comply will be dealt accordingly.

Prepared by:


Niela Aranza
Employee Relations Specialist

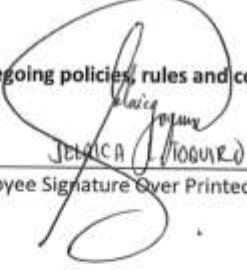
Noted by:


Marishka Iris Arcilla
HR Manager


Carlos Goting
General Manager


Alfredo Camarillo
Director of Operations

I have read, understood, and agreed to comply with the foregoing policies, rules and conditions governing the iPloy Locker Policy.


Jessica J. Moquero
Employee Signature Over Printed Name/Date

DATE : April 3, 2018
To : ALL EMPLOYEES
FROM : HUMAN RESOURCES DEPARTMENT
THRU : OPERATIONS MANAGER
SUBJECT : MEMO: CALL IN FOR OUT OF OFFICE

In order to properly monitor out of office employees, a new process to call in/report absence will be implemented effective Monday, April 9, 2018.

Guidelines:

1. In cases of late and/or absences, employee should report to Human Resources through SMS or Call via HR hotline: 0917-709-7074
2. Notification should contain the following information:
 - a. Complete (real) Name
 - b. Department
 - c. Team Leader
 - d. Call in for: (Whole day Absent, Half-day Absent, Late)
 - e. Reason
3. HR will be the one to send notification to Operations Management
4. No call in should be communicated through Team leads or any other employee. It should be done by the employee or his/her relatives
5. Notification should be at least two (2) hours before the employee's shift
6. If an employee is advised to rest/confined in the hospital, number of rest days as advised by the physician should be indicated. Otherwise, employee must send notification daily
7. Failure to notify will be tagged as No Call, No Show and/or unscheduled absence and will be dealt with according to our Code of Conduct and Discipline.

For your guidance and strict compliance.


Jo Hanna Melecio
Human Resources

Noted by:


Alfredo Camarillo Jr.
Director, Operations



February 18, 2020

To : ALL EMPLOYEES
FROM : OPERATIONS MANAGEMENT
SUBJECT : ATTENDANCE BONUS 2020

As we end the year 2019, iPloy would like to set clear key procedures and policies. This memorandum serves as reminder to be followed:

PAYROLL

1. Immaculate Attendance Bonus is for employees with perfect attendance. Employee should NOT commit any schedule deviations like tardiness, unscheduled absences, undertime and overbreak. Failure to punch in – out for breaks will also disqualify the employee. No waivers will be given.
2. Tardiness, Undertime and Over breaks will be deducted from the employee's pay.
3. Employees who tendered their resignation before the release of the Sign On Bonus (First Half or Second Half) will NO longer be eligible to receive it.
4. Employees qualified for the Sign On Bonus (First Half or Second Half) will receive it on the 30th of the succeeding month from eligibility.
5. Eligibility for the annual merit increase is based on overall performance and management discretion. Pay out is at management's discretion.

MEDICAL CERTIFICATE

1. When must the medical certificate be dated?


- 1 day absence – the medical certificate must be dated on the day of absence or the next day. If the absence falls on a Friday, the medical certificate must be dated the Saturday that immediately follows – at the latest. It cannot be dated on the day that the agent is to report back to work.
- 2 days absence - the medical certificate must be dated on the initial day of absence or the next day. If the absence falls on a Thursday, the medical certificate must be dated either that Thursday or the next day – at the latest. It cannot be dated on the Saturday that immediately follows or that Monday that the agent is to report back to work.
- 3 days of absence or longer - the medical certificate must be dated on the initial day of absence or the next day. It cannot be dated on the day that the agent reports back to work with the advice to rest antedated from the initial date of absence. Also, the advice to rest is inclusive of rest days.
 - o Ex: If the agent is absent on a Friday and the medical certificate states advised to rest for 3 days, that is inclusive of the day of absence that the agent took to rest plus Saturday and Sunday – the agent must be back to work on Monday.



- o If the doctor prescribes rest, the medical certificate must include the number of days of rest. The advice to rest cannot be antedated.
- o There must be a fit to work date.
- o The only exception to the Medical Certificate date guidelines is if the employee has been hospitalized.

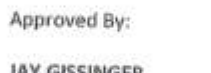
VACATION LEAVES

1. The company reserves the right to approve and disapprove all vacation leave (VL) requests.
2. Employee must exactly have the corresponding credits for the request to be approved.
1 credit = One Day
.5 credit = Half Day
3. Employee with perfect attendance 60 days from the requested VL date will be given priority in the approval of leaves. This is a way of rewarding employees with perfect attendance.
4. The company and client have the right to disapprove leave requests and cancel approved leaves for those employees who committed unscheduled absences on the prior month and on the current month of the requested time off including poor attendance records, behavioral and productivity issues.

Sincerely yours,

ABEJARDO DAGALEA
Operations Manager

Noted By:

MARISHKA RIS ARCILLA
HR Supervisor

Approved By:

JAY GISSINGER
Chief Executive Officer

ALFREDO CAMARILLO JR.
Director of Operations



Date : November 17, 2021
TO : ALL EMPLOYEES
From : HUMAN RESOURCES DEPARTMENT
Subject : RE: SICK LEAVE POLICY

Sick Leave is to be used by employees who are ill, or any other form of absences supported by a valid document.

1. Employees are required to notify the HR hotline number (0917-709-7074) and/or send an email to **hr@iploy.com** at least two (2) hours before the employee's shift (following call-in procedure) and/or within 24 hours from the first day of absence.

2. Employee may use sick leave for absence due to the following reason:

- Employee's illness or injury.
- Bereavement leave/s
- Emergency leave/s
- Power Outage/Internet Outage (for temporary Work from Home set-up)

3. Employee must file the incurred sick leave in HRweb within 48 hours. Failure to file the sick leave on the given hours will be forfeited.

Note: No more Manual filing of Sick Leave except if the employee was hospitalized and/or quarantine due to COVID-19.

4. Below are the documents needed to provide to use the paid sick leave;

- **Employee's illness or injury**
 - At the discretion of the employer, the employee should furnish a certificate from a physician stating that the employee was incapacitated from work for the period of absence because of sickness or injury and that the employee is again physically able to perform his or her duties. (Medical Certificate with Fit to Work)
 - Blacklisted Doctors and clinics' will not be honored. (Please refer to the Blacklisted Clinic/Physician Memo)
- **Bereavement leave** (Please refer to the Bereavement Leave Policy)
- **Emergency leave**
 - Validate his/her absence through supporting documents as to why she/he was having emergency leave on the said date.
- **Power Outage**
 - Certification from their electric/power supply provider (e.g., VECO, CEBECO, MECO)
- **Internet Outage**
 - Ticket number from the internet service provider and/or screenshot/link of official outage announcement from the internet/telco provider
 - Picture of the modem (showing red, no light in "internet")

5. Any unauthorized sick leave will subject the employee to disciplinary action. SL is unauthorized under the following circumstances:

- The employee failed to inform the immediate superior or HRD about his/her absence due to illness unless fully justified.



- If sickness claimed is fictitious or non-existent.

6. The employee or his/her representative must inform his/her immediate superior or HR if an extension of SL will be needed to recover from the sickness. A medical certificate must be submitted before the expiration of the SL. Absence of notice and certification will be considered unauthorized unless the company physician, after due examination of the employee, certifies that extension of leave is warranted.

This Memorandum shall take effect on November 22, 2021.

Please be guided accordingly.

Created by:




MARISHKA IRIS ARCILLA
HR Manager

Noted by:



Alfredo Camarillo Jr.
Director, Operations



Angelo Manal
Operations Manager



Carlos Gotiong
General Manager



Date : November 12, 2019
To : ALL EMPLOYEES
FROM : HUMAN RESOURCES DEPARTMENT
THRU : OPERATIONS MANAGER
SUBJECT : SSS SICKNESS CLAIMS – 5 CALENDAR DAYS

For those employees' who wants to file for sickness claims must submit the duly accomplished SSS notification form attached with original and complete medical documents. It should be submitted **within 5 calendar days from the start of sickness**, they may ask their relatives, friends and workmates to submit their form in Accounting office.

A member is qualified to avail of this benefit if:

1. He is unable to work due to sickness or injury and confined either in a hospital or at home for at least four (4) days;
2. He has paid at least three (3) months of contributions within the 12-month period immediately before the semester of sickness or injury;
3. He has used up all current company sick leave with pay; and
4. He has notified the employer or the SSS, if unemployed, voluntary or self-employed member regarding his sickness or injury.

Failure to submit the documents within the prescribed period will free iPloy from any liability of their claims.

For your guidance.


If there are any questions or clarifications, please feel free to approach the Human Resource Department.

Sincerely,



Marishka Lita Ancilla
Human Resources

Noted by:



Alfredo Camarillo Jr.
Director, Operations



DATE : October 4, 2023
TO : ALL EMPLOYEES
FROM : HUMAN RESOURCES
SUBJECT: UPDATED BLACKLISTED CLINICS AND/OR PHYSICIANS

This is in reference to the previous memo sent out last December 9, 2022 regarding the above-mentioned subject. We are updating this memo adding more clinics and/or physicians that are considered blacklisted and medical certificate/documents issued by them will not be accepted. In the event that the employee submits any of the med certs under these clinics/Physicians will be tagged as culpable for Insubordination under Rule 1 Section 22 of our Code of Conduct and Discipline.

The following are **NOT ACCEPTABLE** and are considered part of the **BLACKLISTED CLINICS/PHYSICIANS**:

1. Rajah Tupas Medical Services
2. Bimbo H. Tequillo MD Clinic
3. Lolita E. Abella-Libres, DMD
4. Dr. Omar Arceo, MD
5. Sia Clinic
6. Health Doc Diagnostics
7. Gaudioso Montecillo Jr., MD
8. Now Serving
9. Dr. Guian Darnell Sumalinog
10. Tambut Medical Clinic
11. Clinics/Physicians without complete contact details such as but not limited to the following:
 - 11.1 Doctor's name
 - 11.2 Doctor's license number
 - 11.3 Clinic/Doctor Phone number
 - 11.4 Date of Actual visit
 - 11.5 Diagnosis
 - 11.6 Recommendation
 - 11.7 Fit to work date

New Clinics added:

12. Enad Clinic
13. Bing Clinic
14. Gia Clinic
15. Veloso Clinic
16. Dr. Paolo N. Apuli
17. Lourdes D. Sasoy, MD

When providing medical certificates for absences, ensure the following:

1. The certificate must be issued on the day of the absence or the day after.
2. Strictly follow all instructions provided in the recommendation. Proof of compliance, such as a receipt for prescribed medications and laboratory results, may be requested.
3. HR/Clinic will validate all medical certificates, including fit-to-work certifications. Remember that no fit-to-work certificate will be denied entry.



4. Do not make erasures on the document. Any corrections made must be counter-signed by the attending physician.
5. Ensure that the soft copy (sent through email) matches the original copy submitted to HR.

Please be aware that the following concerns may render a medical certificate invalid and unacceptable:

1. No consultation date specified.
2. No diagnosis provided. Please note that Z codes are not considered as diagnosis.
3. No contact information displayed in the medical certificate.
4. Absence of physician's name and license number.
5. Phone numbers listed in the medical certificate are incorrect and/or unable to be verified or contacted.
6. Medical certificates with inconsistencies or discrepancies determined by HR/Company Nurse/Company Doctor to be questionable.
7. The clinic/physician does not facilitate phone validations for the issued medical certificate.
8. The clinic/physician's services are primarily related to cosmetic procedures and consultations, making them unsuitable for absence-related medical certifications.

Lastly, since hospitals and clinics are now having less restrictions for consultations and our situations are constantly improving since the pandemic hit, therefore, **we will no longer accept consultation done online/via phone calls. Consultation must be done face-to-face.**

This updated memorandum shall take effect on **October 15, 2023**.

Should you have questions or clarification regarding this, please do not hesitate to send us an email at er@iploy.com.

For strict compliance.

Prepared by:



Niegel Arganza
Employee Relations Supervisor

Noted by:


Ramelyn Castañares
HR Manager


Mariska Iris Arcilla
HR Manager


Nino Angelo Manal
Operations Manager


Alfredo Camarillo Jr.
Director of Operations



Date : November 30, 2022
To : ALL Employees
FROM : Human Resources Department
SUBJECT : VACATION AND SICK LEAVE CONVERSION

We are pleased to announce that the Sick Leave conversion will be released on December 15, 2022 payout. In this connection, all remaining SL credits are to be converted thus, SL application is no longer allowed until the end of the year.

As for the Vacation Leave (VL) conversion, all unused VL credits will be released on the 30th of December 2022. All employees can plot a VL request until December 8, 2022 ONLY. The actual VL dates will cover only until April 30, 2023. Kindly take note of the reminders below in reference to filing of VL:

- No retraction of approved VLs. If the employee reports for work on the actual VL date, the VL will not be reimbursed and will be voided.
- No rescheduling of VL once approved.
- VL date should not fall on a local holiday otherwise forfeited.

Note: Approval of VL requests will be on or before December 14, 2022.

Furthermore, if the employee resigns or gets separated from the company either voluntary or involuntary, all available VL credits will be forfeited and will not be part of their last pay if:

- Employee filed an immediate resignation and/or failed to provide a 30-day notice.
- Employee went on Absent Without Official Leave (AWOL)
- Employee incur any leave, absences, and/or any form of terminal leave within the 30-day notice period with the exception that the employee provided a valid documentation such as but not limited to hospitalization due to sickness, accidents, or contagious diseases.
- Employee incurred more than four (4) hours of accumulated and/or total late/undertime within the 30-day notice.
- Employee will have issues with performance including but not limited to quality, productivity, & client escalation within the duration of the 30-day notice.
- Incurred any behavioral infraction such as but not limited to Sleeping, Browsing Unrelated Websites and etc.

Furthermore, SL and VL conversion maybe subject to tax. Should you have questions pertaining to this memo, feel free to reach out to our Accounting personnel at Accounting@iploy.com.

Signed:


Ramon Castañares
HR Manager


Marjanna Iris Arcilla
HR Manager


Ginebra Centura
Accounting Manager

Noted by:


Angelo Nino Manal
Operations Manager


Alfredo Camarillo Jr.
Director of Operations

Approved by:


Jay Gasalder
CEO



December 17, 2019

To : ALL EMPLOYEES
FROM : OPERATIONS MANAGEMENT
SUBJECT : CLEANSING PERIOD

iPloy Staffing Solutions believes in giving employees enough room for improvement to straighten out employment in regards to compliance to our company's Code of Conduct. The aim of this approach is to help motivate employees rectify passed offenses and start anew.

Cleansing Period pertains to the time when an employee who has been subjected to a Disciplinary Action (DA) is expected to improve performance. Ample time is given to correct improper behavior and refrain from committing any other infractions.

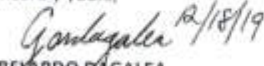
If an employee does not commit the same infraction for the specified cleansing period, the progression of the disciplinary action will slide back to a level depending on its type. Please refer to table below:

INFRACTION	CLEANSING PERIOD (Months)
Attendance	6
Productivity	6
Behavioral	12

The counting of the Cleansing Period will start based on the date when DA was decided upon. All documentations for infractions will still be kept in the Employee's 201 File regardless what period of progression.

The Cleansing Period is effective January 1, 2020 covering DAs 6 months and older.

Sincerely yours,


ABEYARDO DAGALEA
Operations Manager

Noted By:


ALFREDO CAMARILLO JR.
Director of Operations

Approved By:

JAY GISSINGER
Chief Executive Officer





CODE OF CONDUCT AND DISCIPLINE (Table of Infractions)

I. STATEMENT OF POLICY

The Code of Conduct and Discipline is designed to ensure healthy and positive working environment, and hopes to maintain and uphold professionalism among iPlay Inc. employees. The established norms herein set forth are geared towards the attainment of the Company's Goals and Objectives. It is worthy to emphasize that the Code is not meant to be oppressive nor it is intended to threaten and intimidate employees. Indeed, it serves as the guiding principles on what is expected of iPlay employees to conduct during the entire employment here in iPlay, Inc.

II. DOCTRINES TO GOVERN THE COMPANY'S CODE OF CONDUCT AND DISCIPLINE

1. The right to discipline and discharge employees for just and proper causes is management's prerogative enshrined from the 1987 Philippine Constitution.
2. Fairness and Justice shall always govern the imposition of disciplinary actions. Existing Labor Laws, Implementing Rules and Jurisprudence will always be observed.
3. The full and strict maintenance of discipline is the management's responsibility. Thus, it shall be the primary concern of immediate superiors and department heads to instill any disciplinary actions against their subordinates whenever a violation of the rule is committed.
4. Administrative investigations and other proceedings shall be conducted expeditiously.
5. Imposition of penalties when warranted, shall not be cancelled, nor delayed for any reason.
6. The rights of the respondent as provided for by law shall be guaranteed.
7. The management may mitigate the penalty to be imposed, subject however to management's approval and upon compliance to the conditions set forth by the latter.
8. In cases of multiple violations of this Code, the following rule shall apply as to the penalty to be imposed:

Category	Penalty to be imposed
Minor offense	The higher penalty shall be imposed.
2 or more offenses under the same category	Penalty for the most extensive of offense shall be imposed.

III. PROCEDURE

1. Incident Report will be submitted to Human Resources (HR) within 2 working days from the date of the incident.
2. Human Resources will issue a Notice to Explain (NTE) to the employee within 3 working days.
3. Direct Superior should coach the employee within 5 working days from the issuance of the NTE.
4. Coaching Form and Written Explanation of the employee should be submitted within 5 working days from the issuance of the NTE.
5. HR will issue Notice of Decision with or without sanctions within 5 days from the receipt of the Coaching Form and Written Explanation.
a. Failure to provide Written Explanation shall constitute a waiver of the employee's right to be heard and confirms that all the details in the Incident Report are true and without any biases.
b. Lapses in the timeline will result to a sanction – Neglect of Duty / Insubordination
c. Lapses in the timeline will not void the sanction.

IV. GENERAL BEHAVIORAL STANDARDS

As an iPlay employee we expect that you will meet the following behavioral standards:

- a. Proper Conduct and Decorum is expected from you within the office and outside when representing the Company. This includes appropriate dress, attending the office ready to work, use of proper and decent language, observance of proper office and work decorum, maintaining proper relationships with your colleagues, customers and other individuals not in the employ of the company, observance of and compliance with existing laws of the Philippines.
- b. Enhancing Company Productivity the Company expects the proper care and utilization of Capital available to the Company; turning up for work ready to work on time all the time, following the appropriate break and finish times, getting on with the job and performing the job to the best of your ability, positive attitude and dedication to one's work assignments, supporting supervisors and those in management.
- c. Following rules on customer and client relations and always maintaining a professional helpful attitude with customers.
- d. Maintenance of health and safety of the office and people around you. A proper attitude towards cleanliness and proper housekeeping in the office, good health of yourself and others around you, assist in the security of the office, following basic safety procedures.
- e. Proper use of Company Property, facilities and security to protect company and employee assets. Secure handling and maintenance of Company records, keep confidential and protect the integrity of all Company operating data and information, appropriate use of all Company equipment for work related purposes, properly account for all Company funds received.



I. Applicability

This Code shall apply to all iPlay employees, regardless of status or position held.

II. Types of Offenses

Level 1 – Infractions which are minor in nature but which may become habitual and disruptive if not corrected. It has no detrimental impact of the business.

Level 2 – Serious offense which causes delay in operations, may pose threat, harm, or danger to Company property and/or lives of individuals.

Level 3 – Infractions which will destroy the company's image and reputation. It causes substantial loss to the company and can result to critical operational disruption. A critical offense that has compromised the security of the employees, the integrity of Client, the safety of customer's information and the stability of the business.

III. Table of Infractions

I. Rules on Proper Conduct and Decorum

Section	Description of Infraction	Type of Offense	1 st Instance	2 nd Instance	3 rd Instance	4 th Instance	5 th Instance
1	Causing unnecessary noise or disturbance within the Company Premises.	Level 1	Documented Verbal Warning	Written Warning	Final Written Warning	Suspension - 3 Days	Dismissal
2	Failure to comply - iPlay Dress Code Policy.	Level 1	Documented Verbal Warning	Written Warning	Final Written Warning	Suspension - 3 Days	Dismissal
3	Non-participation in compulsory company activity or group work.	Level 1	Documented Verbal Warning	Written Warning	Final Written Warning	Suspension - 3 Days	Dismissal
4	Failure to maintain orderliness or cleanliness in the assigned work station. Failure to practice Clean As You Go policy for all areas in the office.	Level 1	Documented Verbal Warning	Written Warning	Final Written Warning	Suspension - 3 Days	Dismissal

Section	Description of Infraction	Type of Offense	1 st Instance	2 nd Instance	3 rd Instance	4 th Instance	5 th Instance
5	Improper or unbecoming conduct as to cause disorder or disrupt work.	Level 1	Documented Verbal Warning	Written Warning	Final Written Warning	Suspension - 3 Days	Dismissal
6	Bringing of personal mobile phones delicately to the operations or trading areas other than those authorized. Bringing of non-work related electronic gadgets (laptops, tablet/computer device, cameras, etc.) inside the company premises without prior approval from the immediate supervisor.	Level 1	Documented Verbal Warning	Written Warning	Final Written Warning	Suspension - 3 Days	Dismissal
7	Eating in unauthorised areas (operational, management & support area) within the company premises especially while taking calls.	Level 1	Documented Verbal Warning	Written Warning	Final Written Warning	Suspension - 3 Days	Dismissal
8	Speaking in another language or dialect other than English within the company designated area.	Level 1	Documented Verbal Warning	Written Warning	Final Written Warning	Suspension - 3 Days	Dismissal
9	Failure to log in/out in Biometrics and other required attendance monitoring tool. Failure to punch in/out for breaks and leave per day considered as one (1) instance.	Level 1	Documented Verbal Warning	Written Warning	Final Written Warning	Suspension - 3 Days	Dismissal
	3 manual acts in a month from keyclocking tool will merit 1 instance.						



Section	Description of Infraction	Type of Offense	Instances				
			1 st	2 nd	3 rd	4 th	5 th
10	Tardiness: a. 3 Counts of Tardiness of ten (10) minutes in a month is considered 1 instance b. 1 Count of Tardiness of more than an hour in a month is considered 1 instance.	Level 1	Documented Verbal Warning	Written Warning	Final Written Warning	Suspension - 3 Days	Dismissal
		Level 1	Documented Verbal Warning	Written Warning	Final Written Warning	Suspension - 2 Days	Dismissal
11	Under time - left early and failed to complete the 8 hour shift.	Level 1	Documented Verbal Warning	Written Warning	Final Written Warning	Suspension - 2 Days	Dismissal
12	Unauthorized Absence/absence without official leave (AWOL) for 3 consecutive days.	Level 1	Documented Verbal Warning	Written Warning	Final Written Warning	Suspension - 3 Days	Dismissal
13	Failure to wear ID inside office at all times, non-adherence to the No ID, No Entry Policy.	Level 1	Documented Verbal Warning	Written Warning	Final Written Warning	Suspension - 3 Days	Dismissal
14	No Call No Show.	Level 2	Written Warning	Final Written Warning	Suspension n - 5 Days	Dismissal	
15	Failure to report back for work on time from scheduled break.	Level 2	Written Warning	Final Written Warning	Suspension n - 5 Days	Dismissal	
16	Withholding vital information necessary during investigation or any official inquiry.	Level 2	Written Warning	Final Written Warning	Suspension n - 5 Days	Dismissal	
17	Taking part in any gambling, lottery or any other game of chance on company time and/or within company premises.	Level 2	Written Warning	Final Written Warning	Suspension n - 5 Days	Dismissal	
18	Managering to swipe work.	Level 2	Written Warning	Final Written Warning	Suspension n - 5 Days	Dismissal	

Alvin S. Reyes



Section	Description of Infraction	Type of Offense	Instances				
			1 st	2 nd	3 rd	4 th	5 th
19	Loitering, doing very little and spending time in a lab, wasteful work loitering during working hours.	Level 2	Written Warning	Final Written Warning	Suspension n - 5 Days	Dismissal	
20	Flagrant discourtesy, either by acts or words, use of disrespectful language, impolite or obscene language in addressing or speaking with superior and other employees.	Level 1	Written Warning	Final Written Warning	Suspension n - 5 Days	Dismissal	
		Level 2	Written Warning	Final Written Warning	Suspension n - 5 Days	Dismissal	
21	Lacking work assignments or company priorities during official work hours without prior consultation and approval from the immediate supervisor or HOD/ Administrator of unit.	Level 1	Written Warning	Final Written Warning	Suspension n - 5 Days	Dismissal	
		Level 2	Written Warning	Final Written Warning	Suspension n - 5 Days	Dismissal	
22	Insubordination - Failure to comply any directive and/or instructions from Superior and/or Management/With Management/With discipline.	Level 2	Written Warning	Final Written Warning	Suspension n - 5 Days	Dismissal	
23	Neglect of Duty - Failure to implement policies and procedures.	Level 2	Written Warning	Final Written Warning	Suspension n - 5 Days	Dismissal	
		Level 2	Written Warning	Final Written Warning	Suspension n - 5 Days	Dismissal	
24	A. Offering, soliciting or accepting favors or anything of value in exchange for a task, job, work, or favorable employment condition B. Accepting "gifts" of more than \$200 in value without prior approval or notification to the Management, Key Personnel, Management Admin, IT, TL etc).	Level 2	Written Warning	Final Written Warning	Suspension n - 5 Days	Dismissal	
		Level 2	Written Warning	Final Written Warning	Suspension n - 5 Days	Dismissal	