



Employee Handbook Questionnaire

Name of Company(ies): _____

Contact name, email address: _____

Legal Structure (i.e., cooperation, LLC): _____

State(s) in which the Company is doing business: _____

Number of full-time employees: _____ Number of part-time employees: _____

Number of other employees (i.e., contract, seasonal): _____

Employee Introductory Period (i.e., 30 days, 60 days, 90 days): _____

Payday(s) fall(s) on what day/date? _____

What if payday falls on a holiday or weekend? _____

How are employees paid (i.e., direct deposit, check)? _____

What is the workweek (i.e., Monday through Sunday)? _____

How long are lunches and/or breaks? _____

Do you complete annual performance appraisals? If so, when? _____

Please describe your benefits package, if applicable. Include who qualifies for benefits (i.e., full-time employees only; part-time employees on pro rata basis). _____

Vacation/Sick/PTO Leave (include accrual rates, if applicable): _____

Holidays: _____

Other types of leave (i.e., military, maternity, LOA): _____

Health Insurance (employer paid premium? waiting period?): _____

Life/LTD Insurance: _____

Other insurance (i.e., dental, cancer, supplemental): _____

Other benefits (i.e., FSA, continuing ed, health membership, CLE/CE): _____

Please check the following policies that you would like to see in your proposed Employee Handbook:

Section 1- Introduction		Section 4- Benefits cont.	
Introduction Statement		Jury Duty (Paid/Unpaid)	
Purpose of Employee Handbook		Voting Leave	
Nature of Employment-At-Will Statement		Bereavement Leave (Paid/Unpaid)	
Equal Employment Opportunity		Nursing Mothers/Breast Feeding	
Immigration Law Compliance		Health Insurance	
Disability Accommodation		Dental Insurance	
History/Culture of Company		Life Insurance/AD&D Insurance	
Mission/Vision Statement		Short-Term Disability	
		Long-Term Disability	
Section 2- Work Culture		Health Savings Account (HSA)	
Employee Relations		Flexible Spending Account (FSA)	
Personal Relationships in the Workplace		Retirement Savings	
Open Door Policy		Employee Assistance Program (EAP)	
Business Ethics and Conduct		Supplemental Insurance	
Unlawful Harassment		Continuing Education	
Confidentiality		Professional Memberships	
Non-Solicitation		Tuition Assistance	
Non-Compete/Non-Disclosure		COBRA	
Conflicts of Interests		Patient Protection and Affordable Care Act (ACA)	
Social Media		Personal Leave of Absence (LOA)	
Access to Personnel Files		Family and Medical Leave Act (FMLA)	
Telephone Etiquette		Military Leave of Absence	
Personal Cell Phone Use			
Dress Code		Section 5- Performance Standards	
Company Property		Performance Appraisals	
Outside Employment		Attendance and Punctuality	
Visitors in the Workplace		Progressive Discipline	
Information Security		Problem Resolution	
		Salary Review	
Section 3- Employment			
Employment Classifications		Section 6 – Safety and Security	
Introductory/Orientation Period		Drug and Alcohol Policy	
Payment of Wages		Parking	
Pay Deductions		Company Vehicles	
Administrative Pay Corrections		Personal Use of Vehicles	
Timekeeping and Reporting		Weapons Free Workplace	
Background/Reference Checks		Health and Safety	
Work Schedules		Workplace Violence Prevention	
Meal Periods/Break Periods		Workers Compensation	
Overtime		Tobacco Use/Tobacco Free Workplace	
Internal Transfers and Promotions		Emergency Closings	
Company Credit Cards		Inclement Weather	
Travel and Reimbursement		Building Security	
Shift Differential		Accident Reporting (OSHA)	
On-Call Pay/Policy		HIPAA	
Section 4- Benefits		Section 7 – Termination of Employment	
Employee Benefits (Overview)		Termination of Employment	
Holiday Pay		Final Pay	
Vacation			
Sick Leave			
Paid Time Off (PTO)			