EMPLOYE JOB & STATUS CHANGE NOTICE

To VIRGIL BRANLEY (Foreman) Dept. 246 Date 8/20/64

NAME JAMES MEYER T.C.# 1273

REGULAR TRANSFER (Job Ownership)
- ☐ Award Notice Only
- ☐ Bid Job
- ☐ Bumped
- ☐ Assigned
- ☐ Returning (Expansion)
- ☐ Relief Work

FROM ATTENDANT DEPT. 91319

TO PACKER DEPT. 246 RATE 2.90½

Off-Days 1-SUNDAY Sen. 8-12-64 Phone GROVER 5-2358

Address # 1007 SOUTH ST., NEW ATHENS, ILL.

Replacing ~~~~~

UTILITY TRANSFER
- ☒ No Choice
- ☐ Day Choice
- ☐ Shift Choice
- ☐ 5-Year Selection

EMPLOYMENT
- ☐ New Employe
- ☐ Ret. from Lay Off
- ☐ Ret. from L.O.A.
- ☐ Ret. from Absence

TEMPORARY SEPARATION
- ☐ Lay Off
- ☐ Off W/O Pay
- ☐ Military Service
- ☐ Leave of Absence
- ☐ Other (Specify)

PERMANENT SEPARATION
- ☐ Retire
- ☐ Resign
- ☐ T. & P.D.
- ☐ Dropped
- ☐ Discharged
- ☐ Deceased

Remarks

Effective Date 8/20/64

Authorization G. P. Painter

PCB-ARCH-EXT0375555

WGK 289
REV. 6/60

W. G. KRUMMRICH PLANT

EMPLOYE INDOCTRINATION CHECK LIST DEPARTMENTAL

INSTRUCTIONS TO SUPERVISOR: *Fill out in duplicate if this is a new employe. Forward tear-off portion of original to Employment Department. Give remainder of original to employe. File carbon for duration of employe's stay in department.*

NAME J Meyer. | T/C NO. 1273 | DEPT. 246

GENERAL

- ☐ STARTING TIME 8:00 Am + 3:50 PM
- ☐ LUNCH PERIOD 20 MIN
- ☐ QUITTING TIME 3:50 PM + 11:50 PM
- ☐ SHIFT ROTATION Days + Middles
- ☐ DAYS OFF Sat + Sun.
- ☐ RATE OF PAY $ 2.90½ PER HOUR
- ☒ SMOKING RESTRICTIONS
  - *WHEN* _____
  - *WHERE* _____
- ☒ PERSONAL TELEPHONE CALLS - *Emergency Only.*
- ☒ SAFETY EQUIPMENT ISSUED - USE AND REPLACEMENT
- ☒ FIRE ALARMS
  - *TELEPHONE - Dial 200 ZONE* 1-1
  - *DEPT.* 246
  - *MANUAL - Location of Alarm Box*
- ☒ EMERGENCY MEDICAL AID OR AMBULANCE - *Dial 400*
- ☒ LOCATION OF EMERGENCY SHOWERS
- ☒ FAGEMASTER - DAYS - *Dial 434 for Maint. Pers. "operator" for others 300 for night & wk. ends.*
- ☒ ABSENCES - *Call In and Log No. Procedure*
- ☒ LOCATION OF WASHROOM & TOILET
- ☒ LOCATION OF BULLETIN & OVERTIME BOARDS

TRAINING

- ☒ DEPARTMENTAL SAFETY PRACTICES
- ☒ TIME & PLACE OF RELIEVING
- ☒ OPERATING INSTRUCTIONS - *Location & Importance*
- ☒ RELATIONSHIP OF JOB TO OTHERS IN DEPT.
- ☒ SCOPE OF JOB & RESPONSIBILITIES
- ☒ HOUSEKEEPING AREA ASSIGNED _____
- ☒ SAMPLING - *Location of Laboratory*
- ☒ RECORDS - *Use of forms*
- ☒ METHOD OF TRAINING - *With Whom. For How Long, Method of Determining Qualification On Job.*
- ☒ DEPARTMENT LOCKER NO. _____ ASSIGNED
- ☒ TOUR OF DEPARTMENT - *Introduction to Supervision and Fellow Employes.*

JOB ASSIGNED Packer | DATE 8-20-64

TO: EMPLOYMENT DEPARTMENT

NAME | T/C NO. | DEPT.

DATE | INDOCTRINATED BY | ☐ NEW EMPLOYE ☐ TRANSFERRED EMPLOYE

PCB-ARCH-EXT0375556