

# **Rhode Island Handbook Addendum**

## **ABOUT THIS HANDBOOK**

This Rhode Island Handbook Addendum applies to Stiles Machinery employees who work in the State of Rhode Island and supplements our Employee Handbook. The policies noted in this Addendum are in addition to those that make up the Employee Handbook, and the policies that reside within that Handbook still apply to all employees of Stiles Machinery. In the event of any inconsistency between the Handbook and this Addendum, this Addendum will control for our employees working in Rhode Island.

# **Rhode Island-Specific Policies**

## **1-1 Payment of Wages**

Stiles Machinery will pay Rhode Island employees on a weekly basis.

## **1-2 Report-In Pay**

Employees will be paid for at least three (3) hours of work after reporting for a scheduled shift lasting three (3) or more hours, even if the employee works for less than three (3) hours. This does not apply where an employee elects to leave prior to three (3) hours of employment.

## **1-3 Rhode Island Parental and Family Medical Leave**

Rhode Island employees are entitled to apply for Temporary Caregiver Insurance Benefits through the state. Eligible employees will be granted up to six (6) weeks of leave to care for an ill or injured family member or domestic partner, or to bond with a newborn or adopted child. An employee must file with the department and notify the employer a minimum of thirty (30) days' notice prior to commencement of the family leave. Failure by the employee to provide the written intent may result in delay or reduction in the claimant's benefits, except in the event the time of the leave is unforeseeable or the time of the leave changes for unforeseeable circumstances.

You will not lose any employment privileges by taking leave.

Please contact human resources for more information on applying for and taking this leave.

## **1-4 Military Leave**

Employees who require time off from work to fulfill military duties are treated in accordance with the applicable requirements of state and federal laws. Employees who need military leave are expected to give Stiles Machinery as much advance notice as reasonably possible, so that Stiles Machinery can plan for the absence.

You will not lose any employment privileges by taking leave. Please contact Human Resources for more information about military leave.

## **1-5 Military Family Leave**

Stiles Machinery will provide employees with unpaid military family leave when the spouse or parent of an employee is called to military service for over thirty (30) days. Employees are eligible for thirty (30) days of leave, provided the employee has been employed with the employer for at least 12 months and worked at least 1,250 hours in the preceding 12-month period and provides at least fourteen days' notice if the leave will be at least five (5) days. Leave may be taken during the time federal or state orders are in effect. Employees must exhaust all other leave, except for sick and disability leave, before taking this leave. Stiles Machinery reserves the right to request certification from the proper military authority. Employees who need military leave are expected to give Stiles Machinery as much advance notice as reasonably possible, so that Stiles Machinery can plan for the absence.

You will not lose any employment privileges by taking leave.

Please contact Human Resources for more information about military family leave.

## **1-6 Victim Leave**

Stiles Machinery will provide unpaid leave for employees who are victims or a crime or the immediate family member of a homicide victim to attend court proceedings related to the crime. An employee must provide a copy of the notification of court proceedings to Stiles Machinery prior to taking leave. Employees may elect whether to use Paid Time Off as provided by Stiles Machinery for this purpose. Stiles Machinery reserves the right to limit the leave taken by an employee for this purpose if the leave creates an undue hardship for the Company. You will not lose any employment privileges by taking leave.

## **1-7 Drug Testing**

In accordance with Rhode Island law, Stiles Machinery will not conduct random drug testing for Rhode Island employees. However, Stiles Machinery reserves the right to require a drug or alcohol test upon reasonable and articulable suspicion of intoxication or use. The Substance test will be conducted by securing a urine or blood sample or through another method permitted by state law. All positive test results will be confirmed by a federally certified laboratory. Employees may rebut or explain results and have the sample tested by an independent testing facility. Stiles Machinery will pay for all tests conducted. Please see human resources for more information regarding Stiles Machinery's substance use and testing policies.

## **1-8 Medical Marijuana**

In accordance with Rhode Island law, Stiles Machinery will not discriminate against employees who are registered medical marijuana cardholder who use or who test positive for marijuana. However, Stiles Machinery reserves the right to take adverse employment actions against any employee who uses, possesses, or is impaired by marijuana during the hours of employment or on work premises.

## Rhode Island Handbook Addendum Acknowledgment

This Rhode Island specific Handbook Addendum is an important document intended to help our employees become acquainted with policies specific to the State of Rhode Island. This document is intended to provide guidelines and general descriptions only; it is not the final word in all cases. Individual circumstances may call for individual attention.

Because the Company's operations may change, the contents of this handbook may be changed at any time, with or without notice, in an individual case or generally, at the sole discretion of leadership.

Please read the following statements and sign below to indicate your receipt and acknowledgment of this Rhode Island Handbook Addendum.

**I have received and read a copy of Stiles Machinery's Rhode Island Handbook Addendum. I understand that the policies, rules, and benefits described in it are subject to change at the sole discretion of the Company at any time.**

**I further understand that my employment is terminable at will, either by myself or the Company, with or without cause or notice, regardless of the length of my employment or the granting of benefits of any kind.**

**I understand that no representative of Stiles Machinery other than the Head of Human Resources and/or the President may alter "at will" status, and any such modification must be in a signed writing.**

**I understand that my signature below indicates that I have read and understand the above statements and that I have received a copy of the Company's Rhode Island Handbook Addendum.**

Employee's Printed Name: \_\_\_\_\_

Employee's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

The signed original copy of this acknowledgment will be filed in your personnel file.