City and County of San Francisco



Edwin M. Lee, Mayor

Human Services Agency

Department of Human Services
Department of Aging and Adult Services

Trent Rhorer, Executive Director

Employer Application/Agreement To Participate in the JobsNOW4 Wage Subsidy Program

1.	Employer (Business) Name:						
2.	Business Address: Send mail to: (if different from business address)	dress)					
3.	Telephone number(s):						
4.	Name of Employer Representative: Title:						
5.	Type of Organization:	9.	City Vendor ID Number (if application)	able):			
Indi	vidual Corporation LLP/LLC						
Part	nership Non-Profit Other:						
6.	Number of Current Employees:	10.	Employer Email Address:				
7.	Years in Business:	11.	Employer referred by:				
8.	Federal Tax Identification Number	Self	f HSA staff Voucher				
		One	e Stop Center Staff				
	Other Community Based Organizatio						
		Name o	of Contact:				
12. Des	cribe the nature of your business (Mandatory):						
	•						
Minim	um Qualifications			Yes	No		
13.	I agree that my business is not in default on payroll taxes or business taxes.						
14.	I agree that all employees under this agreement will be paid <i>at least</i> the San Francisco Minimum Wage Rate, currently \$10.24 per hour.						
15.	I agree to comply with San Francisco labor laws reg leave and minimum wages.	arding e	employee health care, paid sick				
	Applies to San Francisco businesses only. For more information regarding these labor laws, visit the Office of Labor Standards Enforcement website. www.sfgov.org/site/olse						
16.	I agree to pay payroll taxes, including Federal Insurance Contribution Act (FICA), California Unemployment Insurance, State Disability Insurance, and Worker's Compensation Insurance, as well as the costs of supervision, any necessary equipment and any other normally provided employee benefits.						

17.	I agree to document the above mentioned costs.						
	HSA will provide instructions and an incosts.						
18. Please describe the positions you plan to hire through the JobsNOW4 program:							
Job Title		Number of	Starting Hourly	Anticipated Weekly			
		Positions	Wage	Hours			

Additional Information and Employer Requirements

- 1) Under this agreement, the San Francisco Human Services Agency (SF-HSA) will <u>reimburse</u> Employer for wages paid to eligible and approved Employees in an amount not to exceed \$5,000 for each eligible employee hired.
 - a) The reimbursement will be paid in monthly installments not to exceed \$1,000, for a period not to exceed 6-months.
 - b) Wages paid in excess of \$1,000 in each calendar month are the sole responsibility of the Employer.
 - c) Employees MUST work a minimum of 25 hours a week to be eligible for the reimbursement.
 - d) Employer is expected to retain Employee(s) as a fully unsubsidized employee(s) once the reimbursement period ends. Wages in excess of \$5,000 are the sole responsibility of the Employer.
- 2) The Human Services Agency has the right to approve or not approve Employer(s) at its sole discretion, based on program needs, budget limitations and Employer suitability to participate in this program.

Criteria to be used to evaluate Application/Agreement will be:

- a) Past Agency experience with Employer.
- b) Employers having demonstrated fiscal capacity in having the ability to retain Employees once subsidy ends.
- c) Completeness of Application.
- d) Employer providing job opportunities consistent with the skills present in the job candidate pool.
- e) Employers having experience in managing a workforce.
- f) The Human Services Agency may require Employer applicants to supply additional information or documentation to support this application.
- 3) All individuals hired under this JobsNOW4 Wage Subsidy program shall be hired as regular members of the Employer's work force and are subject to the same conditions of employment as the Employer's other regular employees, including periodic wage increases for performance or termination for unsatisfactory performance. Other conditions of employment include the following:
 - a. The Employee is on the Employer's regular payroll.
 - b. The Employee receives the same benefits as the employees on the Employer's regular payroll performing similar work.
 - c. The Employee receives the same starting wage and other wage increases as other employees performing similar work.
 - d. If Employee is performing work not being performed by other employees, Employer will pay a starting wage consistent with the local labor market.
 - e. The Employee is provided special clothing or equipment if such is provided to the Employer's regular employees performing similar work.
 - f. The Employee is provided supervision and training in the occupation for which the individual is hired in order to obtain transferable skills.
 - g. Employer agrees to contact SF-HSA representatives should problems arise with Employee's work performance in an effort to mediate any issues or problems that impairs Employee's ability to perform to Employer's satisfaction.
- 4) Employer agrees to provide SF-HSA Employee's employment status information once the SF-HSA subsidy ends.
- 5) Employers must submit Employment Verification Forms PRIOR to the employee's start date.
- 6) Employers must receive approval of the wage rate PRIOR to the employee's start date.
- 7) Employer may not exceed the number of JobsNOW4 employees authorized by the SF-HSA.
- 8) Respondent further understands that this Wage Subsidy Application/Agreement shall be terminated:
 - a. Automatically upon termination of the Employee(s); or,
 - b. Upon written notice by the City when the City has determined that the Employer has failed to comply with any part of the application/agreement; or,

- c. When the Human Services Agency determines the Employer is not acting in good faith to carry out the terms of this application/agreement.
- 9) Employers will not be reimbursed for any wages paid to Employee **PRIOR** to SF-HSA approval of the Employer Application for JobsNOW4.
- 10) Respondents will bill the Human Services Agency monthly for reimbursement of actual wages paid for each approved employee. Included with the invoices must be copies of payroll records and/or time cards of the Employee(s) to provide verification of employment hours and wages and benefits paid during the billing period. The Human Services Agency will not honor invoices without payroll verification. The Employer shall bill promptly. The Human Services Agency reserves the right to disallow any claim filed more than 45 days following termination of this Agreement.
- 11) JobsNOW4 employees may not be related by blood or marriage to the Employer nor should they receive any favorable treatment for participation if related to any other employees.
- 12) Employers may not hire laid-off staff to their former positions. Employees may not have been an active employee of the Employer in the past 30 days prior to this Agreement. Employer further certifies that Employee was not subject to lay-off or otherwise terminated for the express purpose of being re-employed under this Agreement. This program is intended to add to your workforce, not subsidize your current workforce. All applicable federal, state, municipal and local standards for health and safety in work and training situations, including all provisions of the Occupational Safety and Health Act of 1979 and all amendments hereto, will be maintained.
- 13) Employer shall permit the City, its employees and authorized representatives to inspect, audit, examine and make excerpts and transcripts from all records, books, papers, and other documents related to this Agreement. The rights of City pursuant to this Section shall remain in effect so long as Employer has the federal and state obligations to maintain such files, records, books, invoices, documents, payrolls and other data.
- 14) Employer will comply with the Americans with Disabilities Act and Title VII of the Civil Rights Act of 1964. Employer shall not discriminate on the grounds of race, creed, color, disability, sex, sexual orientation, national origin, age, religion, Vietnam-era Veteran's Status, political affiliation, or any other non-merit factors.
- 15) No individual shall be discriminated against solely because of his or her status under this Agreement.
- 16) Individuals shall be compensated at such rates, including periodic increases, as may be deemed reasonable under regulations prescribed by the Secretary of Labor, but in no event at a rate less than that specified in Section 6(a)(1) of the Fair Labor Standards Act of 1938 or if higher, under the applicable state or local minimum wage law.
- 17) Employer will comply with the provisions of the Immigration Reform and Control Act of 1986, which requires employers to verify that all employees are eligible to work in the United States as legal residents of the Unites States.
- 18) This Agreement shall not impair existing contracts for service or collective bargaining agreements. Terms of this Agreement shall be undertaken only with written concurrence of the labor organization concerned
- 19) Employer understands that fraudulent claims or actions under this Agreement are subject to criminal penalties under San Francisco Administrative Code Section 21.35, and the City may invoke all remedies available to it in the event of such fraud. Examples of fraud would be submitting a false invoice requesting reimbursement on wages that have not been paid, or invoicing for employees who did not perform any work during the invoicing period.
- 20) Employer has a "Permit to Employ and Work" on file during the term of employment of any minors hired under this Agreement, and will comply with all labor laws applicable to the employment of a minor.
- 21) Employer shall provide Worker's Compensation insurance for the Employee at Employer's own cost and expense and further, neither the Employer nor its carrier shall be entitled to recover any costs, settlements, or expenses of

Worker's Compensation claims arising out of this Agreement. **Employer shall provide evidence of this insurance coverage with this application.**

22) Employer shall provide comprehensive general liability insurance protection, and, if the Employee will operate a motor vehicle as part of his/her job responsibilities, shall also provide comprehensive automobile liability insurance. Employer shall provide evidence of this insurance to the city upon request.

By signing below, you agree to abide by the conditions and requirements described in pages 3 and 4 of this document.

IN WITNESS WHEREOF, this APPLICATION/AGREEMENT is executed by and on behalf of the parties hereto and the parties hereby acknowledge that they are authorized to bind their respective organizations.

For Employer	for City	
Name: Title:	Trent Rhorer Executive Director Human Services Agency	
Authorizing Signature	Authorizing Signature	
Date	Date	

Please submit this form with original signature, worker's compensation insurance certificate, and the completed W-9 in a sealed envelope clearly marked with "Employer Subsidy Program Application" to:

S.F. Human Services Agency P.O. Box 7988 Attn: Elinoemi Asenloo, 8E18 San Francisco, CA 94110-7988