****

**LACLEDE INDUSTRIES**

**EMPLOYEE HANDBOOK**

**About Us**

**Who We Are**

Laclede Industries is a registered not-for-profit corporation in Missouri, dedicated to providing employment and rehabilitation opportunities for individuals with disabilities, as defined in 178.900 RSMo. We operate under the authority of the Department of Elementary and Secondary Education, which regulates Extended Employment Sheltered Workshops.

As an Extended Employment Sheltered Workshop, we partner with businesses to supply products and services, creating meaningful job opportunities for our employees. At Laclede Industries, employees earn a paycheck based on their productivity. Our workplace fosters skill development and good work habits, preparing individuals for greater independence.

Successful employees at Laclede Industries demonstrate hard work, a willingness to learn, teamwork, and respect for colleagues.

**Mission Statement**

Laclede Industries is committed to providing meaningful employment opportunities for individuals with disabilities.

**Our Goal**

We aim to improve the quality of life for the individuals we serve by offering diverse occupational choices within our facility and, when possible, within the broader community. We encourage individuals to reach their highest potential in any employment setting they choose.

**Objectives**

1. Provide individuals with disabilities the opportunity for meaningful work with skill-based compensation.
2. Instill strong work ethics.
3. Maintain professional employer-employee relationships.
4. Support employees in expanding their work skills for greater independence and community integration.
5. Advocate for the inclusion of individuals with disabilities in all aspects of community life.

**Employment Information**

**How to Apply**

Individuals seeking staff positions or sheltered employment will need to submit an application for employment. Applications are available online at lacledeindustries.com or may be picked up at 941 Utah St., Lebanon MO during normal business hours.

Individuals with disabilities seeking to sheltered employment options must also provide documentation demonstrating how their disability impacts their ability to work in a competitive environment and that information is submitted to the Department of Elementary and Secondary Education, Sheltered Workshops Division, which determines eligibility. If an applicant is certified as eligible, Laclede Industries will attempt to match their skills with available positions.

**Equal Employment Policy**

Laclede Industries does not discriminate based on race, color, religion, national origin, sex, disability, age, or veteran status. We provide reasonable accommodations for disabled applicants and employees who can perform the essential functions of their positions.

**Employee Policies**

**Workforce Innovation and Opportunity Act (WIOA)**

In compliance with WIOA, employees with disabilities seeking sheltered employment must be at least 25 years old to be considered for employment without opening a case with the Missouri Department of Vocational Rehabilitation. If the applicant is under 25, they must attend this appointment and provide us with a case closure letter from Vocational Rehabilitation.

After hire, due to regulations, employees with disabilities must attend mandatory training sessions as required by WIOA regulations. Failure to attend will result in termination.

**Employee Handbook Overview**

This handbook outlines company benefits, procedures, and expectations for employee conduct. It does not constitute a contract, and Laclede Industries reserves the right to modify policies as needed.

**Attendance Policy**

Employees are expected to work their scheduled shifts. Excessive absenteeism burdens coworkers and affects production.

If an employee is ill and has a fever of 100.4°F or higher, they should not return to work until they have been fever-free for at least 24 hours without medication.

**Sick Leave**

Beginning May 1, 2025, employees accrue one hour of paid sick leave for every 30 hours worked, up to a maximum of 56 hours per year. Accrued sick leave may be used for:

* The employee of a family member has a mental of physical illness, injury or health condition.
* The employee or family member requires medical care, diagnosis, treatment or preventative services.
* Laclede Industries is closed due to a public health emergency.
* The employee must care for a child whose school has been closed due to a public health emergency.
* The employee needs to address matters related to domestic violence, sexual assault or stalking.

Family members include children, parents, spouses, domestic partners, individuals in a continues romantic or intimate relationship with the employee, grandparents, grandchildren, siblings, or anyone for whom the employee provides or arranges health or safety-related care.

At year-end, employees may carry over up to 80 hours of sick leave. Any excess beyond 80 hours will be paid out at the employee’s regular rate of pay.

**Vacation Policy**

**Full-Time Employees** (38+ hours per week):

* 1–3 years of service: 40 hours
* 4–10 years: 80 hours
* 10–20 years: 120 hours
* 20+ years: 160 hours

**Part-Time Employees** (fewer than 38 hours per week) receive (8) unpaid vacation days per calendar year and these hours do not carry over to the next year. Vacation days are granted at the beginning of each calendar year. For new part-time employees, vacation days will be frontloaded according to their hire date.

* Hired Jan. – March = (8) days
* Hired April – June = (6) days
* Hired July – Sept = (4) days
* Hired Oct. – Dec. = (2) Days

Vacation requests should be submitted in advance on a Leave Request form and are subject to approval based on business needs.

**Holidays**

Laclede Industries observes the following holidays:

* New Year's Day
* Easter Sunday
* Memorial Day
* Independence Day
* Labor Day
* Thanksgiving Day
* Christmas Day

If a holiday falls on a scheduled day off, an alternate holiday will be designated.

**Other Leave Options**

Laclede Industries offers other leave options according to state and federal law. Details about these leave options may be found on the posters in the employee break areas or in the Laclede Industries Policy and Procedure Manual which is easily accessible by asking your supervisor.

**Pay & Payroll**

Employees are paid via direct deposit. For work completed in the prior pay period (Saturday–Friday), payroll is processed on Monday or Tuesday, and direct deposits are issued the following Thursday. If payday falls on a holiday, efforts will be made to process deposits prior to the holiday.

**Change of Status**

It is the employee’s responsibility to update their personal information when it changes. This includes phone numbers, addresses, marital status, and guardianship status.

**Conduct Expectations**

Employees must follow supervisor instructions and conduct themselves professionally. Workplace behavior should reflect respect and teamwork. Unauthorized visitors during work hours is discouraged.

**Dress Code**

Employees must wear clean, work-appropriate clothing. Production workers must wear closed-toe, non-slip shoes at all times. Employees should always bring appropriate attire as daily assignments may vary.

**Breaks & Meals**

Employees should bring enough food for an entire work shift. Microwaves are available, but perishable items should be stored with ice packs to prevent spoilage.

Water and restrooms are available at all worksites. Employees should use restrooms during breaks whenever possible and notify a supervisor if a restroom break is needed during work hours.

**Transportation**

Certified employees may receive limited transportation support. Employees earning subminimum wages may be eligible for up to $2.00 per workday in transportation assistance, subject to funding availability.

Company vehicles may only be driven by authorized employees who have successfully passed background checks, drug testing and licensing requirements. Seatbelts must be worn at all times vehicles are in motion, and cell phone use while driving is prohibited.

**Personal Belongings**

Laclede Industries is not responsible for lost or stolen personal items. Employees should avoid bringing valuables to work.

**Resignation & Termination**

Employees should provide at least two weeks’ notice before resigning. Employees absent for three consecutive workdays without notice will be considered to have voluntarily resigned.

Laclede Industries may terminate employment at any time for reasons not prohibited by law, including, but not limited to, policy violations, misconduct, or business needs.

**Wage Garnishments**

Laclede Industries complies with all legal wage garnishments. Employees are encouraged to manage their financial responsibilities to avoid court-ordered deductions.

**Company Contact Information**

Laclede Industries  
PO BOX 1286  
Lebanon, MO 65536  
Phone: 417-588-3241 or 417-588-3242  
Email: Lacledeindustries501c3@gmail.com

**CEO (Emergency Only):**  
Linda Kimrey – 417-991-1599

This handbook provides an overview of Laclede Industries’ policies and procedures. It is subject to change at management’s discretion. Employment with Laclede Industries is at-will, meaning either the employer or the employee may terminate the relationship at any time for any lawful reason.

**Workplace Safety & Conduct Policies**

**Safety Guidelines**

1. **Glove Requirement**: Employees must wear designated gloves provided by Laclede Industries when handling recycling materials, deburring, grinding glass, using saws, cleaning, working with chemicals, or in any situation that poses a risk of cuts, splinters, chemical exposure, or blood-borne pathogens. Supervisors may require glove use as needed.
2. **Eye Protection**: Safety glasses provided by Laclede Industries must be worn when deburring, sanding, using weed eaters, blowers, mowers, saws, mixing chemicals, baling materials, or in any environment where flying debris is a hazard. Supervisors may mandate additional use.
3. **Hearing Protection**: Employees must wear company-provided ear protection when operating grinders, mowers, weed eaters, blowers, or in any situation involving high noise levels.
4. **Workplace Conduct**: Running and horseplay are strictly prohibited.
5. **Dress Code**: Employees must dress appropriately for their tasks and weather conditions. Undergarments should not be visible at any time.
6. **Reflective Wear**: When working around industrial trucks or moving vehicles, employees must wear appropriate reflective safety gear.
7. **Incident Reporting**: All incidents, including injuries, falls, equipment malfunctions, and property damage, must be reported to a supervisor immediately.
8. **Seatbelt Use**: Seatbelts must be worn at all times when operating or riding in a company vehicle.
9. **Cell Phone Policy**: Vehicle drivers are prohibited from using cell phones while driving.
10. **Health & Illness Policy**: Employees with a fever of 100.4°F or higher (without fever-reducing medication) should not report to work. They may return only after being fever-free for 24 hours without medication.

**Workplace Conduct**

1. **Professional Interactions**: Employees must refrain from physical contact during work hours, such as kissing, hitting, or inappropriate touching. Personal relationships should not disrupt the workplace.
2. **Respectful Communication**: Verbal abuse, harassment, threats, and discriminatory language related to race, gender, age, sexual orientation, religion, or nationality will not be tolerated.
3. **Personal Space**: Maintain at least an arm's length of personal space while conversing with others.
4. **Tone & Volume**: Speak respectfully and avoid yelling.

**Attendance & Scheduling**

1. **Punctuality**: Employees must arrive on time for every shift.
2. **Call-in Procedure:** Staff members must notify their supervisor of an absence at least one hour before their scheduled shift. Sheltered employees must call in prior to their scheduled start time.
3. **Planned Leave**: Employees should complete leave requests with their supervisor in advance whenever possible.
4. **Work Ethic**: Employees must remain actively engaged in their duties unless on an approved break.
5. **Appointments**: Schedule personal appointments on days off whenever possible.

ER1

**General Rules**

1. **Leaving Premises**: Employees must notify their supervisor before leaving the worksite.
2. **Personal Information Updates**: Address, phone number, email, and emergency contact changes require an updated Employee Data Form.
3. **Borrowing Policy**: Employees may not borrow items from coworkers during work hours. If in need of food, clothing, or shelter, they should speak with a supervisor.
4. **Personal Belongings**: Radios, cell phones, and personal electronics must not disrupt work. Lost or stolen items are the employee's responsibility.
5. **Tobacco Use**: Tobacco use is only permitted in designated areas—by the ramp at Laclede Industries or at least 50 feet from entrances at welcome centers. Employees working at other locations should confirm designated areas with a supervisor.
6. **Visitors**: Work-hour visits should be limited to emergencies or break times.
7. **Break Periods**: Use breaks for eating, refilling beverages, and restroom use. Return to work promptly.
8. **Supervisor Guidance**: When uncertain about a task or policy, consult a supervisor.
9. **Work Responsibilities**: Employees are expected to complete assigned tasks. While some task preferences may be considered, employees must perform the work assigned by their employer.

**Compensation & Performance**

1. **Performance-Based Pay**: Pay is based on productivity, attendance, accuracy, and effort.
2. **Direct Deposit**: Employees are responsible for submitting updated banking details via a direct deposit form if needed.

**Workplace Rights & Respect**

1. **Respect & Dignity**: All employees, coworkers, and supervisors have the right to be treated with respect.
2. **Harassment-Free Workplace**: Employees are entitled to a work environment free from verbal, sexual, financial, and physical abuse.
3. **Personal Belongings**: Employees may bring personal items, but if these interfere with work performance, management may request they be left at home.

**Acknowledgment & Agreement**

I acknowledge that I have read and understand the workplace policies outlined above. I agree to comply with all company rules and regulations.

**Employee Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ER 2



**EMPLOYEE ACKNOWLEDGMENT AND RELEASE**

I, [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_], acknowledge that I have received a copy of the Laclede Industries Employee Handbook, which was updated on March 5, 2025. I understand this updated version includes new information, with significant changes to the sick leave and vacation policies.

By signing this acknowledgment, I confirm that I have reviewed the handbook and understand that I must familiarize myself with the updated policies and procedures outlined within. I know that the guidelines in the handbook are intended to guide workplace expectations and benefits but do not constitute a contract of employment.

I further acknowledge that I am responsible for directing any questions or concerns regarding the handbook or its updates to my supervisor or CEO.

**Employee Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Employee Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Witness Name (Supervisor):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Witness Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Leave Request Form**

**Employee Information:**

* Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Submission Date: \_\_\_\_\_\_\_\_\_\_\_**\_**\_\_

**Circle the Type of Leave Requested:**

* Vacation
* Sick Leave
* Other – Please describe reason for leave: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Leave Details:**

* Start Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_\_ End Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_\_

**Employee Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ D**ate:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_\_

**Supervisor Approval:**

* Approved: [ \_\_\_\_ ] Yes [ \_\_\_\_\_ ] No Vacation Days Remaining \_\_\_\_\_\_\_\_\_\_\_\_

**Leave Request Form**

**Employee Information:**

* Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Submission Date: \_\_\_\_\_\_\_\_\_\_\_**\_**\_\_

**Circle the Type of Leave Requested:**

* Vacation
* Sick Leave
* Other – Please describe reason for leave. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Leave Details:**

* Start Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_\_ End Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_\_

**Employee Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ D**ate:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_\_

**Supervisor Approval:**

* Approved: [ \_\_\_\_ ] Yes [ \_\_\_\_\_ ] No Vacation Days Remaining \_\_\_\_\_\_\_\_\_\_\_\_\_

LR 3-5-25