

Intern / Lab Student / Volunteer Cover Sheet

Section A	Last Name	Start Date
Employee Information	First Name, Middle Initial	Red ID
	Social Security Number	
		Division
Section	B: 11 A 1N 1	Position Type (please, check one):
В	Primary Labor Account Number	☐ Intern
Payroll	Additional Labor Account Number	
Information	Additional Labor Account Number	☐ Volunteer
Section		
C		
Miscellaneous	Enroll in DMV Pull Program: Yes No If yes, must submit copy of DL and Operating Vehicles Policy Agreement	
Information	Background Check (if applicable) Date: _	Live Scan (if applicable) Date:
Section	Lead / Supervisor Name (please print)	
D		
Department	Olgriature	Date
Approvals	Manager / Director Name (please print) _	
	Signature	Date
Intern / Lab Student / Volunteer Checklist		
	Required Forms	Optional Forms Per Department
☐ Volunteer Application		Computer Usage Agreement
☐ Employee Emergency Contact Information		□ Network User Agreement
Confidential Data Sheet (N/A if Rehire)		Operating Vehicles Policy Agreement
Code of Safe Practices		Proof of Insurance (if applicable)Auto Insurance Coverage Verification (if applicable)
☐ New Hire Notice - Injuries Caused by Work☐ Auto Insurance Coverage Ver☐ Safety Orientation Checklist		
Payroll	If we him a last as a war time data.	
Use Only		Additional Labor Accounts Updated Pay Group
	Pay Status Updated Direct Deposit Info Updated Kronos WFC - Employee Role Profile Updated	
	Date Processed	