

Part-time New Hire / Rehire Cover Sheet (In Person Recruitment)

Section A Employee Information	Last Name _____ Hire/Rehire Date _____
	First Name, Middle Initial _____ Red ID _____
	Job Title _____ Division _____

Section B Payroll Information	Primary Labor Account Number _____ Pay Rate _____ Range _____ Step _____
	Additional Labor Account Number _____ Pay Rate _____ Range _____ Step _____
	Additional Labor Account Number _____ Pay Rate _____ Range _____ Step _____

Section C Miscellaneous Information	Position Supervisory Classification: <input type="checkbox"/> Supervisory Position <input type="checkbox"/> Non-Supervisory Position
	Enroll in DMV Pull Program: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, must submit copy of DL and Operating Vehicles Policy Agreement
	Background Check Completed (if applicable) Date _____ Live Scan Completed (if applicable) Date _____

Section D Department Approvals	Supervisor Name (please print) _____
	Signature _____ Date _____
	Manager / Director Name (please print) _____
	Signature _____ Date _____

Employee Forms and Notices Checklist

Section E - Required Forms - Return to Payroll

- Part-time New Hire / Rehire Cover Sheet
- Employment Application
- At Will Acknowledgment & Agreement
- Employee Emergency Contact Information
- W-4 Form
- DE-4 Form
- Direct Deposit Authorization
- I-9 (with supportive documents)
- Confidential Data Sheet (N/A if Rehire)
- Wage Information Notice to Employee (Copy)
- Code of Safe Practices
- Safety Orientation Checklist

Section F - Record of Provided Notices to Employee

- New Hire Notice - Injuries Caused by Work
- Affordable Care Act Marketplace Exchange Notice
- Sexual Harassment Brochure
- For Your Benefit - DE2320
- Disability Insurance Provisions - DE2515
- Paid Family Leave Benefits - DE2511
- Pregnancy Leave

Section G - Provide to Employee

- Wage Information Notice to Employee (Return copy to Payroll)
- Kronos Employee Self Service Guide

Section H - Additional Forms - Return to Payroll if applicable

- Computer Usage Agreement (Required with Network User Agreement)
- Network User Agreement
- On Duty Meal Period Agreement
- Operating Vehicles Policy Agreement
- Proof of Automobile Insurance
- Auto Insurance Coverage Verification

PAYROLL USE ONLY
If rehire, last separation date: _____
Sick Leave Accrual Balance: _____
Pay Group: _____