



CHECKLIST FOR NEW HIRE - EXTRA-HELP/RECURRENT

Must print in Black or Blue ink ONLY.

Employee ID Rcd No. La		Last Name, First Name
Department		
EREQUISITE		
Manual PR - Include copy with packet		Online PR
Post Retirement Ve	rification Form	
		completed and sent to Employment-Human Resources prior to completing this packe est be completed prior to On-Board.
QUIRED		
Direct Deposit Authorization		Oath of Affirmation or Allegiance
Employment Status and Wage Notification		
Extra-Help/Recurrent Appointment Agreement		
Job Action Request (JAR)		Provided Employee a Required Notice of New Health
I-9 and E-Verify, Employment Eligibility Verification		Verification Insurance Marketplace options (notice must be provided
Bronze Plan Enrollment Form#		within 14 days of hire) Social Security Form (Form SSA-1945)
Declination Agreement for Essential Health Plan		W-4, Federal Withholding Allowance Certificate
Coverage#		Development Designation for Lest Develope (Lest Memort
DE-4, State Withholding Allowance Certificate		Designation)
CEHW Clearance [Date:	Salary Savings PST Deferred Compensation Plan
		Participation Agreement
QUIRED (IF APPL	LICABLE)	
Advanced Step Placement Request		Position Number Request - Extra-Help/Recurrent
Combined Giving Campaign Contribution Election		
Agreement		
Occupational Injury	Illnoss Porsonal Phy	ysician Request
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No Copies Needed In Packet

Bilingual Forms Form 700

Incomplete Packets Will Be Returned

EMACS PASSWORD FOR NEW HIRE - The password for new hires is their social security number. The password will expire immediately requiring the employee to create a new password.

DISTRIBUTION: EMACS-HR (0030)

#Applies to employees working 30 hours or more per week who are not covered by an MOU/Compensation Plan