



# New Hire Information Sheet

Legal Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Employee ID # \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Mailing Address if different \_\_\_\_\_

Home Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_

**Race/Ethnicity:** \* \_\_\_\_\_ Asian/Pacific Islander \_\_\_\_\_ Caucasian/White  
\*Used for Federal \_\_\_\_\_ American Indian/Native Alaskan \_\_\_\_\_ Hispanic/Latino  
reporting purposes only \_\_\_\_\_ Black/African American

**Gender:** \_\_\_\_\_ Male \_\_\_\_\_ Female

**Marital Status:** \_\_\_\_\_ Single \_\_\_\_\_ Married

### Emergency Contacts (list two):

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

Phone (H) \_\_\_\_\_ Phone (H) \_\_\_\_\_

Phone (Cell) \_\_\_\_\_ Phone (Cell) \_\_\_\_\_

Phone (W) \_\_\_\_\_ Phone (W) \_\_\_\_\_

Relationship: \_\_\_\_\_ Relationship: \_\_\_\_\_

**For full-time employees, the pre-tax retirement contribution is mandatory and will be deducted from your paycheck.**

Signature of Employee: \_\_\_\_\_ Date: \_\_\_\_\_

Department Head/Elected Official: \_\_\_\_\_ Date: \_\_\_\_\_

## DEPARTMENT USE ONLY

Employment Date \_\_\_\_\_

Work Telephone Number \_\_\_\_\_

Position Number \_\_\_\_\_

Work Location (clock group) \_\_\_\_\_

Pay Location \_\_\_\_\_

Unit Number \_\_\_\_\_

Dept Number \_\_\_\_\_

Schedule (shift) \_\_\_\_\_

Salary \_\_\_\_\_

Supervisor (Y/N) \_\_\_\_\_

Supervisor's Name \_\_\_\_\_

Time Keeping Access \_\_\_\_\_ Phone \_\_\_\_\_ PC \_\_\_\_\_

Assignment \_\_\_\_\_ reg \_\_\_\_\_ temp (Date it ends \_\_\_\_\_)