



NEW EMPLOYEE INFORMATION

Instructions for Administrator- Please complete the information below before the new employee begins. Please **check each box** that applies to the employee. **Have the employee return this page to you after it has been completed, and confirm that ALL items have been completed.**

Name:		Spouse:	
Address:			
Phone:		Cell:	
Personal Email:		Birthdate:	
<i>Type of User and Email Distribution.</i> <i>Please mark each box that applies.</i> <i>Note: All employees are added to the "All Staff" distribution list</i>		Type of User <input type="checkbox"/> Admin <input type="checkbox"/> Teacher <input type="checkbox"/> Technology <input type="checkbox"/> Other Staff <input type="checkbox"/> Guest	Email Distribution <input type="checkbox"/> K-6 core Middle School <input type="checkbox"/> 7-8 core Middle School <input type="checkbox"/> 9-12 Core High School <input type="checkbox"/> K-6 Specialty <input type="checkbox"/> 7-12 Specialty <input type="checkbox"/> Admin Staff <input type="checkbox"/> Administrators <input type="checkbox"/> All DE <input type="checkbox"/> Other: _____
ADMINISTRATOR- PLEASE COMPLETE EACH ITEM AND MARK EACH BOX WHEN COMPLETED.			
<input type="checkbox"/> Sign and give copy of Employment Agreement		Date the Bio will be returned to Administrator: _____	
<input type="checkbox"/> Review Employee Handbook/Teacher Binder		Date to have this form completed and returned: _____	
Completed:		Administrator Signature: _____ Date: _____	
MARILYN PATCH-FINANCE/PAYROLL ROOM 346 PLEASE PROVIDE THESE ITEMS AND MARK EACH BOX			
<input type="checkbox"/> Payroll Sheet / Payroll Information		<input type="checkbox"/> Give New Teacher Binder	
<input type="checkbox"/> I-9 and W-4, copy two forms of ID		<input type="checkbox"/> Get Copies of Credentials (Diplomas, Licenses, Etc.)	
<input type="checkbox"/> Benefits / Insurance Information (Exchange Notice and SPD)		<input type="checkbox"/> Background Check Online / BCI	
<input type="checkbox"/> Give Employee Handbook		Completed: Date Credential Doc's to be provided: _____	
		Payroll Signature: _____ Date: _____	
BOB WHEELER- FACILITIES ROOM 314 PLEASE PROVIDE THESE ITEMS AND MARK EACH BOX			
<input type="checkbox"/> Obtain Key		<input type="checkbox"/> Background/Fingerprint Information and Form	
<input type="checkbox"/> Safety/Security Information		Date fingerprints will be provided: _____	
Completed:		Facilities Signature: _____ Date: _____	
Austin or Todd - TECHNOLOGY - ROOM 515 PLEASE PROVIDE THESE ITEMS AND MARK EACH BOX			
<input type="checkbox"/> User Name and Password		<input type="checkbox"/> LogMeIn	<input type="checkbox"/> Copy Code
<input type="checkbox"/> Explain Email and Outlook for On/Off Campus Use		Follow-up Appointment Date: _____ Time: _____	
<input type="checkbox"/> Explain File Storage		Completed: Technology Signature: _____ Date: _____	
TAMMY MORSE – GRADEQUICK/EDLINE FRONT OFFICE PLEASE PROVIDE THESE ITEMS AND MARK EACH BOX			
<input type="checkbox"/> User Name and Password		Edline/Voicemail Training Appt – Date: _____ Time: _____	
<input type="checkbox"/> Voicemail		Completed: Edline Signature: _____ Date: _____	
MELANIE MCCONKIE – LIBRARY PLEASE PROVIDE THESE ITEMS AND MARK EACH BOX			
<input type="checkbox"/> Setup Faculty Library Account		Initial Inventory Appt – Date: _____ Time: _____	
<input type="checkbox"/> Review Inventory		Completed: Library Signature: _____ Date: _____	

