



NEW HIRE/REHIRE CONFIRMATION

EFFECTIVE DATE:

____ / ____ / ____

PLEASE PRINT CAREFULLY

PAYROLL #

Employee's Last name	_____	First name	_____
Social Security #	_____	Date of Birth	_____
Street	_____		Apt. _____
City	State _____	Zip _____	Phone: _____
Position	Department _____		
Salary \$	_____ <input type="checkbox"/> HOURLY	_____ <input type="checkbox"/> ANNUAL	Status: <input type="checkbox"/> FULL-TIME <input type="checkbox"/> PART-TIME <input type="checkbox"/> TEMP

SUPERVISOR'S SIGNATURE

_____ Date

SENIOR VICE PRESIDENT SIGNATURE

_____ Date

HR DIRECTOR SIGNATURE

_____ Date

PRESIDENT SIGNATURE

_____ Date

NOT REQUIRED FOR PART-TIME FACULTY POSITIONS

FOR PAYROLL/HR USE ONLY:

WITHHOLDING ALLOWANCES # _____

SINGLE

MARRIED

SEX

FEMALE

MALE

EMPLOYMENT SOURCE:

ADVERTISEMENT

INTERNET

NEWSPAPER

REFERRAL

ETHNIC CODE

(CHECK THE APPROPRIATE BOX)
(FOR EEOC PURPOSES)

NATIVE AMERICAN

AFRICAN AMERICAN

ASIAN/PACIFIC ISLANDS

HISPANIC

WHITE