



NEW HIRE PAPERWORK CHECKLIST – Name of Employee:

✓	DESCRIPTION OF FORM OR DOCUMENT	EXPLANATION	DISTRIBUTE TO
	Personnel Action Form – PAF	Form is generated from PeopleSoft	CEO/HR
	I-9 – Verify required forms of identification	Effective 03/08/13	CEO/HR
	W-4 / DE4	For the current year	CEO/HR
	EEO-4 Employee Self Identification Data Sheet	Employee self-identifies	CEO/HR
	Direct Deposit Form	Attach verification of account & routing #	CEO/HR
	Policy Acknowledgement Form	Revised 02/2020	CEO/HR
	Work Week Designation / Fair Labor Standards Act	Revised 11/2015	CEO/HR
	At-Will Status Acknowledgement	Management/Confidential only	CEO/HR
	Appointment Above 1 st Step or Bottom of Band	Memo when applicable	CEO/HR
	LIVESCAN Service: Fingerprint Form for the S/O Dept.	SCOE has all the form templates	CEO/HR
	Offer Letter	Offer Letter	CEO/HR
	Employee's Recruitment Application	Recruitment Application	CEO/HR
	Deputy Oath	Sworn job classifications – County Clerk Form 13	CLK/REC
	Oath of Office	Form 2015-82	CLK/REC
	Rights of Victims of Domestic Violence, Sexual Assault & Stalking	Implemented 08/03/17	EMPLOYEE
	Sexual Harassment Fact Sheet	Implemented 10/1/20	EMPLOYEE

	PART TIME EMPLOYEES: Nationwide Beneficiary Form	Ops & Benefits Form	NATIONWIDE
	401a SSA-1945 Notification	Ops & Benefits Form	BENEFITS

✓	RISK MANAGEMENT DESCRIPTION OF FORM OR DOCUMENT	EXPLANATION	DISTRIBUTE TO
	Medical Provider Network Brochure – <i>Spanish version available upon request from RM</i>	Revised 04/2013	EMPLOYEE
	Acknowledgement Form Confirming Receipt of WC & MPN Brochures	Revised 2018 – SCDM@stancounty.com	SCAN TO RM
	DWC – Time of Hire Pamphlet	Revised 7/2014	EMPLOYEE
	Post Offer-Pre-Placement Screening Passport – US Healthworks	Click on the Drop-Down Menu First to Select	CEO/HR
	Family Medical Leave of Absence Policy (FMLA)	Revised 12/2018	EMPLOYEE
	Your Rights & Responsibilities under FMLA	Revised 02/2013	EMPLOYEE
	Deferred Comp Form 457(b)	All Nationwide forms	NATIONWIDE

	ALL EMPLOYEES: Health Insurance Exchange Notice	All employees effective 02/01/19	EMPLOYEE
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Effective 6/29/13 All Benefit Enrollment Form Should be Sent Directly Via Outlook Email to: CountyBenefits@stancounty.com

EXTRA-HELP RETIRED COUNTY EMPLOYEE (Rehiring a Retiree as a Part Time Employee or Contract Employee)

✓	DESCRIPTION OF FORM OR DOCUMENT	EXPLANATION	DISTRIBUTE TO
	Hiring Retired StanCERA Member	Revised 05/05/15	CEO/HR

RETIREMENT **All Retirement Forms Can Now be Completed Online Before Printing!**

✓	DESCRIPTION OF FORM OR DOCUMENT	EXPLANATION	DISTRIBUTE TO
	Retirement Member Enrollment Form	Revised 09/2015 Attach Copy of Birth Certificate	STANCERA
	Notice to Prospective Members Form 415	Revised 12/2015	STANCERA
	Beneficiary Designation Form Instructions for Active Members	Revised 07/2008	STANCERA
	Beneficiary Designation Form	Revised 07/2012	STANCERA

Please scan Member Enrollment Form to StanCERA & ID Mail all originals to StanCERA

DEPARTMENT TO COMPLETE

Received Copy of Application Form: Yes <input type="checkbox"/>	Req No.:	Exam Plan:
Prepared by:	Department:	
Date of Completion:	Name of Payroll Clerk:	