

# New Hire Packet / Documentos para Nuevos Empleados

<b>1</b> _____ <b>Social Security # / # Seguro Social</b>	____/____/____ <b>Date of Birth / Fecha de Nacimiento</b>	<b>EE File #</b> _____ (to be completed by Payroll)
<b>Employee Name (Please print) / Nombre (por escrito):</b> _____		
<b>Address / Dirección:</b> _____		<b>Apt # / # de Apto:</b> _____
<b>City / Ciudad:</b> _____ <b>State / Estado:</b> _____ <b>Zip Code / Código Postal:</b> _____		
<b>Phone / Tel:</b> (____) _____ - _____ <b>Cell / Tel:</b> (____) _____ - _____ <b>Gender / Sexo:</b> <input type="checkbox"/> Male <input type="checkbox"/> Female		
<b>E-Mail:</b> _____		
<b>Languages spoken and read fluently / Idiomas que habla y lee con fluidez:</b> <input type="checkbox"/> English / Inglés <input type="checkbox"/> Spanish / Español <input type="checkbox"/> Other / Otro: _____		
_____ <b>EMPLOYEE SIGNATURE/FIRMA</b>		_____ <b>DATE/FECHA</b>

<b>2</b>	<b>THIS SECTION COMPLETED BY OPERATIONS DEPARTMENT ONLY</b>																
<b>Position / Title:</b> _____ <b>Hire Date:</b> ____/____/____																	
<b>Location:</b> _____ <b>Time Zone:</b> _____																	
<b>Rate of Pay:</b> \$ _____ <input type="checkbox"/> Hourly <input type="checkbox"/> Salaried <input type="checkbox"/> Exempt <input type="checkbox"/> Non-Exempt																	
<b>Work Schedule (Supervisor to complete)</b> <span style="float: right;"><b>SHIFT:</b> _____</span>																	
<b>Schedule:</b> _____ <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary <input type="checkbox"/> Seasonal	<table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th style="width: 12.5%;">Sunday</th> <th style="width: 12.5%;">Monday</th> <th style="width: 12.5%;">Tuesday</th> <th style="width: 12.5%;">Wednesday</th> <th style="width: 12.5%;">Thursday</th> <th style="width: 12.5%;">Friday</th> <th style="width: 12.5%;">Saturday</th> <th style="width: 12.5%;">TOTAL</th> </tr> </thead> <tbody> <tr> <td style="height: 20px;"></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td style="font-size: small;">Hrs/wk</td> </tr> </tbody> </table>	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	TOTAL								Hrs/wk
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	TOTAL										
							Hrs/wk										
<input type="checkbox"/> Pay Card Issued # _____ OR <input type="checkbox"/> Direct Deposit Provided <b>with a voided check</b>																	
_____ <b>Supervisor Name</b>	_____ <b>Supervisor Phone Number</b>																
_____ <b>Signature</b>	_____ <b>Date</b>																

<b>3</b>	<b>THIS SECTION COMPLETED BY HR/PAYROLL DEPARTMENT ONLY</b>
<input type="checkbox"/> New Hire <input type="checkbox"/> Rehire	
_____ <b>HR/Payroll Representative's Name</b>	_____ <b>Signature</b>
_____ <b>Date</b>	