



Employee Information Form

(To be completed by the hiring manager)

Personal Information

Full Name: _____

Address: _____
Street Address Apt/Unit #

City State Zip Code

Phone: (Home) _____ (Cell) _____

Email Address: _____

Job Information

Start Date: _____ Is this a rehire: ☐ Yes ☐ No

Job Title: _____

Facility/Dept: _____ Remote Worker: ☐ Yes ☐ No

Worker Category: ☐ Full-Time ☐ Part-Time ☐ PRN/OCE Supervisor Role: ☐ Yes ☐ No

Pay Rate: \$ _____ ☐ per hour ☐ per year

Sign-On Bonus(es): ☐ YES ☐ NO Type: _____ Amount: _____

Reports To: _____

Other T&A Supervisor(s): _____

Hiring Manager Signature: _____

Hiring Manager Printed Name: _____

Date Completed: _____

Manager New Hire Checklist

Company Email Requested: ☐ YES ☐ NO

WEX Card PIN Requested: ☐ YES ☐ NO

Company Equipment Ordered: ☐ YES ☐ NO

Time & Attendance Reviewed: ☐ YES ☐ NO