

Employee Intake Checklist

Employee: _____

Document	Received	Notes	Date	Comments
Application / Resume				
Driver's License				
Social Security Card				
Verification Form				
BCI Fingerprints				
FBI Fingerprints				
Certificate/License/Permit				
OAE/Praxis/Assessment Report				
Official Transcripts				
HQT Worksheet				
IPDP (if applicable)				
H. S. Diploma (Classified)				
General Information Form				
I-9				
Acceptable Use Policy				
Sexual Harassment / Staff-Student Policies				
Emergency Leave Form (ELF)				
Fraud Form				
Direct Deposit Form				
W-4				
OH Tax (IT-4)				
City Tax (outside Middletown)				
Public School District				
Social Security/SERS Form				
Ohio Code of Ethics				
Emergency Contact & Med.				
Subs Only (School Request Form)				
Picture ID (<i>to be taken</i>)				

Resident Educator Program					
Resident Educator Program	Yes	No	Mentor's Name		
Number of Years Completed	RE 1	RE 2	RE 3	RE 4	Building

Licensure			
Licensure	Area (s)	License#	Expiration Date

- | | |
|--|---|
| <input type="checkbox"/> Entered into a Database/Frontline | <input type="checkbox"/> Payroll Notified |
| <input type="checkbox"/> Tech Dept. Notified | <input type="checkbox"/> Intake Complete |