

NEW EMPLOYEE CHECKLIST

Name:			
Department:			
Position:Ac		Account:	
Effective Term/Date of	of Appointment:		
Annual Pay Rate:Hourly Rate:		Hourly Rate:	
Background Checks:	http://www.hireright.com/	(Charge to hiring account number)	
J			
Hourly	Appointed Position	Date Completed:	
FORMS: (Yes/No/NA)			
Complete New	Employee Info Form http://www	v.indiana.edu/~uhrs/employment/bloomington/forms.html	
HRMS E-doc (i	must be approved before new employee	e can gain access to e-mail)	
Offer/Acceptan	ice Letter		
	onsent Form elect. signature when they apply on-line. H Employee Agreement/supervis		
Cell Phone Agr	reement		
Application and	Application and Resume		
ED (Personal P	ED (Personal Profile Form) Use this information to complete the HRMS e-doc on-line.		
PS (Personal Pr	rofile Form)		
PSA (Personal	Profile Form)		
Direct Deposit (attach voided check or deposit slip)			
I-9 Employment Eligibility Verification & Identification			
Indiana Tax W	ithholding WH-4		
Federal Tax W	Federal Tax Withholding W-4		
Confidentiality	Confidentiality Statement		
Emergency Con	Emergency Contact Information		
HIPPA Compli	ance Form		
Practicing License			
Drug Card (aca	Drug Card (academic credentialing)		
Degree Confirm	nation		
Prior Employment Verification (7 years)			
FAMS Packet ((GA hires)		
Student Acader	Student Academic Agreement Form http://www.iub.edu/~deanfac/download/download.htm		