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|  | **Checklist of Forms- Substitute**  (Tear out page and return to Human Resource Services) | **Payroll Sensitive**  Name:  Site/School: |

This checklist identifies the two kinds of forms in this packet: (1) those you must **complete and return to Human Resource Services** (Section 1); and (2) those you are to retain for your own information or records (Section 2 Appendix). Please keep in mind the importance of completing and returning the forms in Section 1 to Human Resource Services **within two working days**. **Please return the Checklist of Forms with Section 1 forms.** Thank you.

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| SECTION 1: RETURN | | | |
| * **Checklist of Forms-Substitute** * Emergency Data * Ethnic Origin and Race Questionnaire * Oath of Allegiance * Child Abuse Reporting Req. * Employment Eligibility Verif * Copy of Social Security Card * Authorization for Electronic Money Trnsfr (Direct Deposit) * Federal Withholding Form  (W-4) * State Withholding Form (DE-4) * Retirement Questionnaire * STRS Permissive Membership * Acknowledgement of Receipt of Election Info Retirement System Coverage (STRS) * Retired Employees (STRS) * Workers’ Compensation Reporting Requirements | * Tuberculosis Testing Requirements * Fingerprinting Requirements * Sexual Harassment Reporting * Annual Employee Notifications * SSA 1945 (Certificated, Certifi-cated Substitute if applicable) * Credential (Certificated) * Transcripts (Certificated) * Salary Schedule * Substitute Profile Sheet * Newly Hired Certificated Personnel * Certificate of Medical Examin-ation of Applicants for First Employment in a California School District | | * Certificate of Understanding: Eligibility for Substitute-Paid Insurance Benefits * Serna Center ID Badge Request * New Employee Orientation:   New Employee Orientation:   Date/Time: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| SECTION 2: APPENDIX: MAINTAIN FOR YOUR RECORDS | | | |
| **Appendix A:** School Holidays  **Appendix B:** Payroll Deposit/Deduction Options;     Pay Date Schedules  **Appendix C:** Child Abuse Reporting Requirements  **Appendix D:** Instructions for Employment Eligibility     Verification  **Appendix E:** Commission on Teacher Credentialing     and Union Information  **Appendix F:** Day-to-Day Substitutes/Eligibility Lists  **Appendix G:** Workers’ Compensation Reporting     Requirements | | **Appendix H:** Tuberculosis Testing Sites and     Schedules  **Appendix I:** Annual Employee Notifications, Sexual     Harassment, Uniform Complaints  **Appendix J:** Substitute Finder System  **Appendix K:**  Membership in State Teachers     Retirement System  **Appendix L:** Health Benefits Schedule  **Appendix M:** Bloodborne Pathogens  **Appendix N:** No Child Left Behind (NCLB)  **Appendix O:** Commonly Asked Questions | |

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