

PARISHES OF THE DIOCESE OF SCRANTON  
NEW HIRE FORM

PARISH NAME: \_\_\_\_\_ PARISH #: \_\_\_\_\_

PARISH LOCATION: \_\_\_\_\_

EMPLOYEE NAME: \_\_\_\_\_

ADDRESS LINE 1: \_\_\_\_\_

ADDRESS LINE 2: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ CELL PHONE NUMBER: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ SOCIAL SECURITY #: \_\_\_\_\_

DATE OF HIRE: \_\_\_\_\_

ANNUAL SALARY: \_\_\_\_\_ or HOURLY RATE: \_\_\_\_\_

POSITION: \_\_\_\_\_

FULL TIME: \_\_\_\_\_ PART TIME: \_\_\_\_\_ HOURS PER WEEK: \_\_\_\_\_

EMAIL ADDRESS TO BE USED FOR PAY ENTRY: \_\_\_\_\_

EMPLOYEE SIGNATURE: \_\_\_\_\_

PASTOR/ADMINISTRATOR SIGNATURE: \_\_\_\_\_

HUMAN RESOURCE ONLY:

RECEIVED: \_\_\_\_\_

APPROVED: \_\_\_\_\_

ENTERED: \_\_\_\_\_

DATE: \_\_\_\_\_

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