DIOCESE OF SCRANTON HOLY CROSS - HOLY REDEEMER SCHOOL SYSTEMS NEW HIRE FORM

SCHOOL NAME:		SCHOOL ID#:		
SCHOOL LOCATION:				
EMPLOYEE NAME:				
ADDRESS LINE 1:				
ADDRESS LINE 2:				
CITY, STATE, ZIP:				
PHONE NUMBER:		_CELL NUMBER:		
DATE OF BIRTH:		_SOCIAL SECURITY	#:	
DATE OF HIRE:		_		
ANNUAL SALARY:		or HOURI	LY RATE:	
POSITION:				
FULL TIME:	PART TIME	:	HOURS PER WEEK:	
EMAIL ADDRESS TO BE USED	FOR PAY ENTRY:			
EMPLOYEE SIGNATURE:				
HUMAN RESOURCE ONLY:				
RECEIVED:		APPROVED:		_
ENTERED:		DATE:		