CATHOLIC SOCIAL SERVICES

NEW HIRE / CHANGE FORM

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

ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SS#: XXX-XX-\_\_\_\_\_\_ DATE OF HIRE: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ EFFECTIVE DATE: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

SALARY: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ POSITION: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

CHARGEABLE PROGRAMS:

LEAVE OF ABSENCE:

LAST DATE ON PAYROLL: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ EXPECTED DATE OF RETURN: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

TERMINATION OF EMPLOYMENT:

EFFECTIVE DATE: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ LAST DATE ON PAYROLL: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

COMMENTS:

PROGRAM MANAGER SIGNATURE CEO OF CSS SIGNATURE

CC: PROGRAM MANAGER, CSS PAYROLL SPECIALIST, OFFICE MANAGER, DIOCESAN HR OFFICE

***FOR TERMINATIONS, ALSO INCLUDE IT OFFICE.***