

<b>Town of Suffield</b>
<b>Seasonal &amp; Professional Services Contract New Employee Checklist</b>



Name \_\_\_\_\_

Title \_\_\_\_\_

Start \_\_\_\_\_

<u>New Hire Checklist</u>	<u>Employer Provided</u>
<b>Documents to Sign &amp; Return:</b>	
Employment Eligibility Verification I-9	
W-4 Federal Tax Form	
W-4 State Tax Form	
Equal Opportunity Questionnaire	
Direct Deposit Form	
Hepatitis B Vaccination	
Emergency Contact Form	
<b>Forms for Review</b>	
Town Policies	

***I acknowledge that I have been provided the above checked policies and new hire information.***

***I understand that it is my responsibility to read and ask Human Resources questions about anything that is not clear. I will keep these and any future employment documents in a safe place.***

***I am also aware that updated forms and information will be posted on the Town of Suffield Human Resources website should I need to access this info during non-business hours.***

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date