

## Yosemite Community College District Human Resources

## **CLASSIFIED EMPLOYEE – New Hire Documents**

Please use 1 <sup>st</sup> day of start of work when signing <u>all</u> docu	ments. Sign & return the following:
Fingerprint & Criminal History Background Check. At en maximum of 10 working days from the date of employment.	mployee expense. Additional information enclosed. Required within a
TB Clearance. After receiving your YCCD email, contact 209-575-628. Columbia – Nursing services are currently unavailable positive in the past, please notify the Campus Nurse prior to te	ole, you may see community medical provider. If you have tested
I-9 Form – Employment Eligibility Verification. Verifies Date with first day of work. See "List of Acceptable Documents" a	
W-4 Form. Use your legal name (as listed on your Social Securi	ty card) and mailing address.
<b>EDD Employee's Withholding Allowance Certificate.</b> Thi	s form is required for state income tax withholding.
CalPERS Beneficiary Designation. You are eligible for meminformation, contact Payroll at (209) 575-6538.	abership into CalPERS Retirement. For more
☐ CalPERS Member Reciprocal Self-Certification Form	Are you a Retiree from CalSTRS or CalPERS? ☐ Yes ☐ No
Payroll Direct Deposit. (Optional) Use for direct deposit, and	l attach a voided check.
☐ Oath of Affirmation	
☐ Policy Acknowledgement	
Recipient Designation Form. In the event of death, this form of	designates your monetary recipient.
Safety Training (web-based). Complete & return. For question	ns, please contact Risk Management at (209) 575-6963.
☐ Confidential Data Sheet	
☐ Emergency Contact Information	
☐ Parking Permit Information	
CSEA Application for Membership & Salary Deduction Adues. Please read Article 4 of the CSEA Collective Bargaining Agr	
For Information Only:	
What you Need to Know About Your CalPERS Tax Sheltered Annuities CSEA Collective Bargaining Agreement Affordable Care Act Notice	On-the-Job Injury Reporting Procedure Injury & Illness Prevention Program Manual Schedule of Holidays
I have received, understand, and completed all the above docume Resources no later than the 1 <sup>st</sup> day of start of work and failure to delay in salary placement, delay in pay and/or delay in start of works.	complete fully and sign all required documents may result in
Employee Signature:	Date: