**Missouri Department of Transportation**

 **New Hire Checklist**

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| \*If the checklist is being used for seasonal/emergency workers, some items may not be applicable.  |
| Employee Information: |
| Name         | Date Accepted        |
|  Date of Birth        | SSN       -      -       |
|  Address        | Phone Number        |
| Job Title & Code        /        | Start Date       |
| Safety Sensitive: [ ]  Yes [ ]  No | Physically Demanding: [ ]  Yes [ ]  No |
| CDL Required: [ ]  Yes, regular duties [ ]  Yes, safety sensitive [ ]  No |
| Grade       /Step        | Salary/Hourly $        | Org. Code        |
|  |
| Pre-Employment Information: |
| Tasks: |
| Work Sim Scheduled        | Work Sim Received        |
| Drug Screen Scheduled        | Drug Screen Received       |
| Medical Physical Scheduled         | Medical Physical Received         |
| Send forms to Risk Management (Jefferson City)         |
|  Send forms to clinics         |
| Initiate Background Check         | Background Check Received         |
| Complete | N/A |  |
| [ ]  | [ ]  | After Conditional Offer is sent to CDL/safety sensitive applicants, ask and document questions on “Drug and Alcohol Question Documentation”. If any “yes” answers, contact Central Office Risk and Benefits Division. Include [Drug & Alcohol Question Documentation](http://sharepoint/facilitation/HR/hremployment/_layouts/WordViewer.aspx?id=/facilitation/HR/hremployment/Employment%20Document%20Library/Employment/Drug%20and%20Alcohol%20Question%20Documentation%20Revised%20-%20February%202015.doc&Source=http%3a//sharepoint/facilitation/HR/hremployment/Employment%2520Document%2520Library/Forms/AllItems.aspx?%26%26p_SortBehavior%3D0%26p_FileLeafRef%3DEmplHandbookOctober2012%252ddraft%252epdf%26%26RootFolder%3D%252Ffacilitation%252FHR%252Fhremployment%252FEmployment%2520Document%2520Library%252FEmployment%26PageFirstRow%3D1%26TreeField%3DFolders%26TreeValue%3DEmployment%26ProcessQStringToCAML%3D1%26%26View%3D%7b254091EA-3EEB-48C8-9DA1-F08EBFA24ACA%7d&DefaultItemOpen=1) if applicable.  |
| [ ]  | [ ]  | Conditional Offer Letter sent |
| [ ]  | [ ]  | Verify CDL (if minimum qualification or required for snow plow, including EI/NI status if 21 and over) OR verify valid driver’s license (for positions with frequent driving) |
| [ ]  | [ ]  | Complete New Employee Information Sheet (complete drug pre-employment or post-employment step) |
| [ ]  | [ ]  | Complete ID Badge/Building Access Application |
| [ ]  | [ ]  | Firm Offer Letter sent with training schedule (after pre-employment results come back) scanned and emailed to COHR |
|  |
| Post-Employment Information: |
| Complete | N/A |  |
| [ ]  | [ ]  | Staffing Announcement  |
| [ ]  | [ ]  | Job Fill Folder (see Policy 0517 for required contents of the job fill folder) |
| [ ]  | [ ]  | Initiate ESMT Notification |
| [ ]  | [ ]  | Enter New Employee Information/ESMT in to SAMII – scan copy of Firm Offer Letter to Central Office HR Compensation |
| [ ]  | [ ]  | Acquire official college transcript (only if applicant’s job requires a degree) |
| Employee’s First Day: |
| Complete | N/A |  |
| [ ]  | [ ]  | Provide employee with New Hire Paperwork excluding the I-9 Employment Eligibility Form (they need to complete section 1 on first day and return to HR Rep)* Emergency Contact Information - enter into the Employee Information Database (EID)
* Employee Address Form
* Direct Deposit form (need voided check)
* State and Federal W4 forms
* I-9 Employment Eligibility form (need appropriate form(s) of identification)
* Overtime Choice form
 |
| [ ]  | [ ]  | New Employee Orientation (day 1 or district established date)* Includes receiving benefit information, MPERS, etc.
 |
| [ ]  | [ ]  | Introduce employee to mentor  |
| [ ]  | [ ]  | Employee name badge done |
| [ ]  | [ ]  | If safety sensitive job and if new hire has worked for a previous DOT regulated employer within last 2 years, have new hire sign “Authorization of Request Drug/Alcohol Test Results from Previous Employer” form* **Email/mail/fax form to previous employer(s) as soon as possible.**
* Complete HR section of form and place in job fill file. Send copy to Central Office Risk and Benefits Division
 |
| Employee’s Second Day: |
| Complete | N/A |  |
| [ ]  | [ ]  | Complete New Hire Paperwork and confirm all necessary accompanying documents are provided (voided check for Direct Deposit form, verification documents for I-9) |
| [ ]  | [ ]  | New Employee Orientation (day 2 or district established date) |
| [ ]  | [ ]  | Release employee to mentor |
| [ ]  | [ ]  | I-9 Employment Eligibility Form: MUST be entered into E-Verify within 3 working days from start date. Print Authorization and staple to front of I-9 along with necessary verification document(s). Send originals to Central Office HR Employment |
| SAM II Entries: |
| Complete | N/A |  |
| [ ]  | [ ]  | ATTR – AA information, DOB, marital status, gender, disability, veteran status |
| [ ]  | [ ]  | ADDR – Address Information |
| [ ]  | [ ]  | USR1* for New Hire, enter SSN and enter effective date on lines 1,2,3 (only if full time)
* for wage, seasonal, intern, emergency, (NODED) for MoDOT enter the effective date on line 3 and delete the date on line 4
* if a previous employee, do not enter for emergency/retiree unless retiree is returning in another position other than snow help; enter hire date on line 3 and the last day worked on line 4
 |
| [ ]  | [ ]  | USR3 – Enter Work Sim Information:* Field 1 location of test
* Field 2 level or code passed
* Field 3 Lbs/Saw (maintenance only)
* Field 4 date completed
 |
| After ESMT Approval: |
| Complete | N/A |  |
| [ ]  | [ ]  | Update Chain of Command in the Employee Information Database  |
| What and Where to Send: |
| \*Note: where to send may vary by district |
| Complete | N/A |  |
| [ ]  | [ ]  | W4 State Tax Form – send a copy to division/business unit contact, original to Payroll |
| [ ]  | [ ]  | W4 Federal Tax Form – send a copy to division/business unit contact, original to Payroll |
| [ ]  | [ ]  | Direct Deposit Form – send a copy to division/business unit contact with copy of voided check, original to Payroll with voided check |
| [ ]  | [ ]  | Overtime Choice Form – original to Supervisor for signature (they need to send to Payroll) |
| [ ]  | [ ]  | Employee Address Form – send a copy to division/business unit contact, original to HR Employment for Personnel Folder |
| [ ]  | [ ]  | Emergency Contact Information from EID database–send copy to CO-HR Employment for Personnel Folder |
| [ ]  | [ ]  | Copies of Address Form, Firm Offer Letter and Certificate of Receipt to put in Personnel Folder |
| [ ]  | [ ]  | Official college transcripts – send to HR Employment for Personnel Folder if not attached to online profile |
| [ ]  | [ ]  | Conditional and Firm Offer Letters – send to HR Employment for Personnel Folder |
| Verifications: |
| Complete | N/A |  |
| [ ]  | [ ]  | Selective service record (males only between age 18-26 must be registered) – copy in file – check online verification |
| [ ]  | [ ]  | Check on previous employment with any state agency; if transfer, must be on 1st or 16th of the month; check for any benefit eligible previous time |
| [ ]  | [ ]  | Check SEBES to see if employee is in “contributory” plan. If so, in USR3 Field 12 – enter 2011 Tier |
|  |  |  |
| Information Systems Responsibilities: |
| Verifications: |
|  | Processes STARTS requests  |
|  | Assigns computer and/or other IT resources |

***Please place copy in Employee Personnel folder***