

HR Employee Documentation Cover Sheet

SINGLE EMPLOYEE COVER

Date
03/07/2016



* 4-digit for year
required

Sunset Date
03/07/2016



* 4-digit for year
required

Print or Store Print
 Store to Laserfiche

Scan Package Type* One Employee - One Document Type
 Multiple Employees - One Document Type

*Production:
Forms 9.1*

Employee ID

Last Name OVIST

First Name SARA

Middle Name B

- Document Type*
- Action Forms
 - Administrative Committee Approval
 - Applications and Resumes
 - Background Check
 - Benefits
 - Civil Service
 - Claims
 - Deductions
 - Deferred Comp/MSRS/PERA
 - Emergency Contacts
 - Evaluations
 - HR CDL Drug and Alcohol Program
 - HR OSHA 200 & 300 Logs
 - HR Payroll Taxes
 - I-9 Forms
 - Leaves
 - Material Safety Data Sheets
 - Medical Files
 - Misc. Correspondence
 - Name Authorization
 - OSHA Medical Exams
 - Psychological Evaluations
 - PTO, Vacation and Sick
 - Sheriff Drug And Alcohol Random Program
 - Time Sheets
 - Tuition Reimbursement
 - W-2 Forms
 - W-4 Forms
 - Worker's Compensation



Print Cover Sheet

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