

NORTH ATTLEBOROUGH – TOWN GOVERNMENT NEW EMPLOYEE CHECKLIST

The following is a list of the forms/information necessary to process your employment paperwork. As you complete the paperwork, place a check in the box next to the information provided to ensure that it was completed/received and sign and date the back of the form. **All forms must be returned in a timely fashion or they may be a delay in receiving your pay check.**

EMPLOYMENT FORMS TO BE COMPLETED/SIGNED

- Employment Application (Resume & Offer letter should be included)
- I-9 Employment Eligibility Form (*Two forms of ID required*)
- EEO-4 Self Identification Form
- W-4 Employee's Federal Withholding Certificate
- M-4 Employee's Massachusetts Withholding Certificate
- Criminal Records Check (CORI) Sexual Offender Records Check (SORI) sign off
- Position Audit Form
- Direct Deposit Form (Attach Voided Check, Savings Account Deposit Slip, or a Bank Statement with Routing # and Account #) **Mandatory**
- Staff Emergency Form

Employees must complete one of the 2 forms below depending on their employment.

- OBRA Form (*Required for all employees working < 20 hours.*)
- Town/Retirement New Member Enrollment Form. (*Required employees working >20hrs.*)

Employee should provide a copy of their Birth Certificate and should also provide a notice from a personal physician or Sturdy Hospital (OHS) attesting to the employee's physical capability of performing the duties of the position.

- Physician's statement from OHS or the employee's personal physician (Required for employees working more than 20 hours) Appt. date: _____
- Birth Certificate (for The Retirement Board)

TOWN POLICIES & ACKNOWLEDGMENT FORMS

- ACKNOWLEDGEMENT FORM FOR THE FOLLOWING POLICIES:
 - Code of Professional Conduct
 - Domestic Violence Leave Policy
 - *Internet/Computer Use Policy*
 - Safety Policy
 - Sexual Harassment, Bullying & Hazing Policy
 - Whistleblower Policy
 - Social Media Policy
 - Drug Free Workplace Policy

- State Ethics Commission Mandate Notice
 - The 1st mandate - Annual Distribution and acknowledgement of the summary of the law. (Conflict of Interest Policy)
 - The 2nd mandate – Requires that all employees complete an on-line training program that is currently on the Ethics Commission’s website. (Training)
- Signed Summary of the Conflict of Interest Law for Municipal Employees Form
- Returned State Ethic on-line training Certificate of Completion

- Controlled Substances and Alcohol Use and Testing Policy (CDL Drivers ONLY)
- *Copy of CDL License ((CDL Drivers ONLY)*

- General Notice of COBRA Continuation Coverage Rights
- Signed Acknowledgment of the General Notice of COBRA Continuation Coverage Rights

UNION INFORMATION:

- United Steel Workers (USW)/AFSCME/Laborers
Union Membership Form

BENEFITS

- Benefits Highlights
Benefit Checklist Form – (Signature Required)
 - Benefit Insurance Rates
 - Health Plan Summaries
Health Insurance Enrollment Form
Vision Insurance Enrollment Form
Basic Life Insurance Enrollment Form
 - Flexible Spending Information
Flexible Spending Accounts (Cafeteria Plan Advisors, Inc.)/Authorization for Pre-Tax Payroll Reduction
 - ***100% Employee Paid Benefits***
Dental Insurance Enrollment Form
Voluntary Life Insurance Enrollment Form
 - *Long Term Disability, Critical Illness Plus, Accident Option Plus & Life Option Plus (Permanent Life) – (Please contact Life Plus Insurance Agency, Inc. with any enrollment questions. 781.837.9222*
-