

DGS OHR 70 (Rev. 4/2024)

CONFIDENTIAL: Documents listed contain personal information and pursuant to Civil Code Section 1798.21. and shall be kept confidential in order to protect against unauthorized disclosure.

EMPLOYEE NAME (Last, First M.I.) ABMS NUMBER RPA NUMBER CBID POSITION NUMBER

EFFECTIVE DATE EMPLOYEE'S SUPERVISOR APPOINTMENT TYPE

The Attendance Clerk is responsible for completing this checklist. It is required for ALL appointment types (including transfers within the same office). Unless otherwise specified below, all documents are due to the Office of Human Resources (OHR) Personnel Transactions Unit (PTU) Personnel Specialist within five (5) working days after the employee's date of hire.

THE FOLLOWING MUST BE COMPLETED AND/OR APPROVED PRIOR TO THE EMPLOYEE'S FIRST DAY OF WORK.

- ABMS – KEY EMPLOYEE IN QUICK EMPLOYEE ENTRY
- MEDICAL EXAMINATION (STD 610) (IF APPLICABLE. REQUIREMENT BASED ON CLASSIFICATION)
- SOCIAL SECURITY VERIFICATION

THE FOLLOWING MARKED DOCUMENTS MUST BE PROVIDED AND COMPLETED BY THE EMPLOYEE.

EMPLOYMENT VERIFICATION

- EMPLOYMENT ELIGIBILITY VERIFICATION (I-9) (SENT TO EMPLOYEE AND PERSONNEL SPECIALIST ONLY)

EMPLOYMENT INFORMATION

- SIGNED APPLICATION PACKAGE (STD 678)
- SIGNED DUTY STATEMENT (DGS OHR 907/907A)
- STATEMENT OF ECONOMIC INTEREST (FORM 700) (IF APPLICABLE. REQUIREMENT BASED ON CLASSIFICATION)

POLICIES

- ANTI-DISCRIMINATION POLICY (AO 15-01)
- INCONSISTENT AND INCOMPATIBLE ACTIVITIES AND OUTSIDE EMPLOYMENT POLICY (AO 23-02)
- LACTATION ACCOMMODATION POLICY (AO 23-01)
- NEPOTISM POLICY (AO 13-01)
- PUBLIC AFFAIRS POLICY (AO 21-04)
- SEXUAL HARASSMENT MEMO (AO 15-02)
- SUBSTANCE ABUSE (AO 01-01)
- WORKPLACE VIOLENCE PREVENTION POLICY (AO 09-01)
- WORKERS' COMPENSATION GUIDE (SCIF E13571)

APPOINTMENT

- EMPLOYEE ACTION REQUEST EAR (STD 686)
- DESIGNATION OF PERSON AUTHORIZED TO RECEIVE WARRANTS (STD 243)
- EMERGENCY INFORMATION/PHYSICIAN DESIGNATION (DGS OHR 20)
- CALPERS MEMBER RECIPROCAL SELF-CERTIFICATION FORM (CALPERS-1187)
- STATE EMPLOYEE RACE/ETHNICITY QUESTIONNAIRE (CALHR -1070)
- OATH OF ALLEGIANCE (STD 689)
- OATH OF OFFICE (STD 688) (EXEMPT ONLY)
- MILITARY SERVICE DECLARATION (STD 912)
- EMPLOYEE STATE DISABILITY QUESTIONNAIRE ACKNOWLEDGEMENT (ONLINE SPB – 131 VOLUNTARY)
- EMPLOYEE ASBESTOS NOTIFICATION (STD 250)
- NOTICE OF EXCLUSION FROM CALPERS MEMBERSHIP (CALPERS-1007)
- AUTHORIZATION TO USE PRIVATE VEHICLES (STD 261)
- JOB NOT COVERED BY SOCIAL SECURITY (SSA 1945)

BENEFITS

DOCUMENTS LISTED BELOW MUST BE COMPLETED BY THE EMPLOYEE AND RECEIVED IN PTU WITHIN 15 DAYS TO ENSURE EMPLOYEE'S BENEFITS ARE EFFECTIVE TIMELY. DAYS NOTED ARE COUNTED FROM EFFECTIVE DATE OF APPOINTMENT.

- NEW TO STATE BENEFITS COVER LETTER
- AFFORDABLE CARE ACT NOTIFICATION CHECKLIST (CALHR 782)
- ANNUAL LEAVE – SICK/VACATION ELECTION FORM (CALHR 875)
- NEW HEALTH INSURANCE MARKETPLACE COVERAGE OPTIONS AND YOUR HEALTH COVERAGE NOTICE
- HEALTH BENEFITS (HBD-12)
- DENTAL PLAN PACKAGE (STD 692)
- DEPENDENT ELIGIBILITY VERIFICATION CHECKLIST (CALHR 781)
- PREMIER VISION PLAN ACKNOWLEDGEMENT
- CONSOLIDATED BENEFITS (COBEN) CASH ENROLLMENT ELECTION (STD 702)
- CASH OPTION ENROLLMENT AUTHORIZATION (STD 701C)
- REIMBURSEMENT ACCOUNT ENROLLMENT AUTHORIZATION (STD 701R)
- GROUP LEGAL SERVICES INSURANCE ACKNOWLEDGEMENT
- LONG TERM DISABILITY ACKNOWLEDGEMENT
- LIFE INSURANCE ACKNOWLEDGMENT (EXCLUDED EMPLOYEES ONLY. BENEFIT IS AUTOMATIC.)
- RETIREMENT BOOKLET-ACKNOWLEDGEMENT (TIER 1/TIER 2)
- PART-TIME, SEASONAL AND TEMPORARY (PST) RETIREMENT FACT SHEET
- PST RETIREMENT MEMO

By signing below, I acknowledge that I have received the above documents.

EMPLOYEE SIGNATURE

DATE

By signing below, I acknowledge that I have provided the above documents to the employee.

ATTENDANCE CLERK SIGNATURE

DATE