



Employee Administrative Data

EFFECTIVE DATE: _____

New Hire Name Change *(include new SSN card)* Address/Email Change Benefit Change

Please complete all sections. Return to Foundation. A copy will be returned to you. **DO NOT** write in shaded areas.

LAST NAME		FIRST NAME/M.I.	
SOCIAL SECURITY NO.: <i>(New Hire Only)</i>		RF EMP ID:	D.O.B.
		SEX: <input type="checkbox"/> M <input type="checkbox"/> F	
HOME PHONE:	CHICO MAILING ADDRESS:		
MESSAGE PHONE:	PERMANENT HOME ADDRESS:		
HOME EMAIL ADDRESS:	WORK EMAIL ADDRESS:		

EMERGENCY CONTACT:

Name	Relationship	Address	Phone
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EMERGENCY CONTACT:

Name	Relationship	Address	Phone
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IS THERE ANY ASPECT OF THE JOB FOR WHICH YOU REQUIRE SPECIAL NEEDS/ACCOMMODATIONS? IF SO, PLEASE EXPLAIN:

Specify Ethnicity (select one):

Veteran Status (select all that apply):

Marital Status:

<input type="checkbox"/> WHT White	<input type="checkbox"/> BLK Black or African American	<input type="checkbox"/> SDV Special Disabled Veteran	<input type="checkbox"/> VEV Vietnam Era Veteran	<input type="checkbox"/> Single	<input type="checkbox"/> Married
<input type="checkbox"/> HSP Hispanic or Latino	<input type="checkbox"/> HPI Native Hawaiian or other Pacific Islander	<input type="checkbox"/> OPV Other Protected Veteran	<input type="checkbox"/> NSV Newly Separated Veteran		
<input type="checkbox"/> ASN Asian	<input type="checkbox"/> AMI American Indian or Alaska Native				
<input type="checkbox"/> TWO Two or More Races					

Employee Signature

Date

ADMIN OFFICE USE ONLY

LEAVE DATE: _____

FLBN

FLBN ACCR RGNA FRST STNT FAST

Vacation Adjustment

401 (k) Adjustment

Number	Description		Begin Date	End Date
1100	Qualifying Wages	\$		
1301	Health Project Cont	\$		
1504	401 (k) Cont	\$		
1505	Flex Flat	\$		
1510	Flex Rate	\$		

COMMENTS:

CASHOUT

1515/1516	Flex Cash Out	\$		
<input type="checkbox"/>	1525 Flex Additional	\$ < >		
<input type="checkbox"/>	2400 Life Insurance Buy-up	\$		
<input type="checkbox"/>	2401 LTC Supp Ins	\$		
<input type="checkbox"/>	2705 Health Premium W/H	\$		

Human Resources Signature

Date