

**N A N C E**

**Human Resources Checklist & Workflow**

Employee Name: \_\_\_\_\_ PeopleSoft Empl ID : \_\_\_\_\_  
Location: \_\_\_\_\_ Supervisor/Manager: \_\_\_\_\_  
Dept: \_\_\_\_\_ Requested Start Date: \_\_\_\_\_

**1/ Campus Verify**

- \_\_\_\_\_ Personnel Assignment Status Sheet (PAS Sheet)
- \_\_\_\_\_ Copy of Personal Profile Form
- \_\_\_\_\_ Live Scan Clearance Date \_\_\_\_\_  
(do not send any materials such as Live Scan Application, or email results)
- \_\_\_\_\_ Copy of Online Application
  - > App. Includes Conviction Questionnaire
  - > App. Includes EEO Survey
- \_\_\_\_\_ Enrollment/Beneficiary Designation for FICA Alternative (3121 Plan)
- \_\_\_\_\_ Tuberculosis Clearance Certification
- \_\_\_\_\_ SSA-1945 Form (Employment in Job not covered by Social Security)
- \_\_\_\_\_ Beneficiary Designation for Deceased Employee
- \_\_\_\_\_ Parking Permit Application (please route to appropriate SDCCD Parking Office)
- \_\_\_\_\_ Medical Certificate (returning retirees only)

Signature \_\_\_\_\_ Date \_\_\_\_\_

**2/ Employment**

- \_\_\_\_\_ Onboarding Demographics
- \_\_\_\_\_ Position
- \_\_\_\_\_ GL
- \_\_\_\_\_ TB
- \_\_\_\_\_ Personal Profile

Signature \_\_\_\_\_ Date \_\_\_\_\_

**3/ Retirement**

- \_\_\_\_\_ PERS Retirement (If indicated that EE was a prior member of CalPERS)
- \_\_\_\_\_ Retirement Status Form
- \_\_\_\_\_ Leaves
- \_\_\_\_\_ Sew / My CalPERS

Signature \_\_\_\_\_ Date \_\_\_\_\_

**4/ Payroll**

- \_\_\_\_\_ Taxes
- \_\_\_\_\_ Dues, Workers Comp
- \_\_\_\_\_ Direct Deposit
- \_\_\_\_\_ Date TB Pulled

Signature \_\_\_\_\_ Date \_\_\_\_\_