

CATASAUQUA AREA SCHOOL DISTRICT – www.cattysd.org
Employment Forms Checklist

NAME _____ Phone# _____

POSITION APPLYING FOR General Kitchen Help/Kitchen Substitute

INSTRUCTIONS

It is mandatory, by law, that all applicants of the Catasauqua Area School District complete the following forms prior to your being recommended to the Board of Education for employment. Please present this list, along with completed forms to the Administration Office for confirmation. No applicants will be considered for employment unless all forms are complete.

Please be sure to retain clearance copies for your records.

CHECKLIST

1. Completed application
2. ACT 34 clearance by PA State Police (www.epatch.state.pa.us)
3. PA Child Abuse History Clearance (www.compass.state.pa.us/cwis)
4. FBI Federal Criminal History (<https://uenroll.identogo.com> to apply Service Code 1KG6XN)
5. ACT 168 PA Sexual Misconduct/Abuse Disclosure (1 for each qualifying employer AND current employer)
6. ACT 126 Child Abuse Training Requirement (<https://www.reportabusepa.pitt.edu>)
7. Federal Ethnicity and Race Form
8. Disclosure Statement
9. Act 24 Arrest/Conviction Report and certification form
10. Completed physical exam / TB Test (Physical must be less than 1 year old. TB test must be less than 3 months old)
11. Form I-9 – Citizenship (NEED COPY OF DRIVER’S LICENSE & SS CARD)
12. W-4 tax form
13. Direct Deposit Form – required for all employees
14. Market Place Notification
15. Local Services Tax – CASD Exemption Certificate If income is under \$12,000 must go to municipality working in (see www.newpa.com)
16. Local Earned Income Tax Residency Certification Form (fill in top and bottom sections)
17. Worker’s Compensation Insurance Form
18. Nepotism Policy
19. Copy of Social Security Card if not provided for I9 identification
20. New Employee Email Accounts (all paid applicants)
21. Computer/Internet Acceptable Use Form (all paid applicants)

****DISTRICT USE ONLY****

INTERVIEWED – IF APPLICABLE (SIGN & DATE BY PRINCIPAL) _____

I hereby confirm that the above named applicant has completed all required employment forms as listed. The forms are enclosed herewith.

Date of Hire _____ Signature _____

First Day of Work _____ Date Signed _____

NOTE: Must request retirement/sick days from former district, if employee is transferring to CASD.

File: Personnel (revised 04/21/2016)