

CATASAUQUA AREA SCHOOL DISTRICT – www.cattysd.org

Employment Forms Checklist

NAME _____ Phone# _____

POSITION APPLYING FOR _____

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 (<https://epatch.pa.gov/home>) Clearance must be less than 1 year old
3. _____ PA Child Abuse History Clearance (www.compass.state.pa.us/cwis) Clearance must be less than 1 year old
4. _____ FBI Federal Criminal History (<https://uenroll.identogo.com> Service Code 1KG6XN) Clearance must be less than 1 year old
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>) Training must be less than 1 year old
7. _____ Federal Ethnicity and Race Form
8. _____ Disclosure Statement
9. _____ Act 24 Arrest/Conviction Report and certification form
10. _____ Completed physical exam (on school physical form) / TB Test (Physical must be less than 1 year old. TB test must be less than 3 months old)
11. _____ Professional Certificate (teachers only) PPID # _____
12. _____ Copy of transcripts (teachers and instructional aides)
13. _____ High School Diploma (instructional aides only)
14. _____ W-4 tax form
15. _____ Direct Deposit Form – required for all employees
16. _____ Market Place Notification
17. _____ Local Services Tax – CASD Exemption Certificate If income is under \$12,000 must go to municipality working in (see www.newpa.com)
18. _____ Local Earned Income Tax Residency Certification Form (fill in top and bottom sections)
19. _____ Worker's Compensation Insurance Form
20. _____ Nepotism Policy
21. _____ Release of driver's record (Form AA-502A) (bus/van drivers Custodian/Maintenance only)
22. _____ Transportation Standards/Procedures/Guidelines (Signed) (bus/van drivers only)
23. _____ Pre-Employment Drug Test to be completed after board approval and completion of employment packet (Driver Candidates Only)
24. _____ Computer/Internet Acceptable Use Form (all paid applicants)

****DISTRICT USE ONLY****

INTERVIEWED – IF APPLICABLE (SIGN & DATE BY ADMINISTRATOR) I hereby confirm that the above-named applicant has completed all required employment forms as listed. The forms are enclosed herewith.

Signature _____ Date _____