

# NEW HIRE FORM

HIGHLIGHTED AREA'S MUST BE FILLED OUT TO INSURE PROCESSING.

District #351

1	Social Security #	:	
2	Last Name	:	
3	First Name	:	
4	Middle Initial	:	
5	Street	:	
6	City	:	
7	State Code	:	14 = IL
8	Zip Code	:	
9	Area Code	:	(            )
10	Phone Number	:	-
11	Birthdate	:	/  /
12	Hire Date	:	/  /
13	Gender	:	
17	Filing Marital Status	:	
26	Pension Code **	:	
42	Federal Exemptions	:	
43	State Code	:	14 = IL
44	State Exemptions	:	

## Pay Cycle

## Location

\*\*Teacher=1

Fica =2

IMRF=3

No Pension =4

Teacher/Medicare=5

Sub/Medicare=6

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OFFICE USE ONLY

CONTRACT HOURS

CONTRACT RENEWAL MONTH

 JULY

 OCTOBER

 SEPTEMBER

UNION CODE

SUPERVISOR