

FULL TIME EMPLOYEES

Welcome to Millis – please complete the attached new hire forms. All forms must be completed prior to receiving your first paycheck. Thank you!

PAYROLL EMPLOYEE DATA SHEET (MANDATORY) To be completed by Department Head (SECTION 1) and Employee (SECTION 2). Both must sign and date.

- 1) EMERGENCY CONTACT FORM (MANDATORY)** To be completed and signed by Employee.
- 2) CONFLICT OF INTEREST LAW** To be completed and signed by Employee
- 3) WORKING POST RETIREMENT** To be completed and signed by Employee
- 4) NORFOLK COUNTY RETIREMENT NEW MEMBER ENROLLMENT FORM (DOUBLE SIDED) AND NCR BENEFICIARY FORM (MANDATORY)** Both to be completed and signed by Employee. **A copy of Employee's birth certificate must be attached.**
- 5) FORM W-4 – FEDERAL TAX FORM (MANDATORY)** To be completed and signed by Employee.
- 6) FORM M-4 – MA EMPLOYEE'S WITHHOLDING EXEMPTION CERTIFICATE (MANDATORY)** To be completed and signed by Employee.
- 7) STATEMENT CONCERNING JOB NOT COVERED BY SOC. SECURITY (MANDATORY)** To be completed and signed by Employee.
- 8) FORM I-9 – EMPLOYMENT ELIGIBILITY VERIFICATION FORM (MANDATORY)** To be completed and signed by Employee. **Two forms of identification must be copied and attached.** See "Lists of Acceptable Documents".
- 9) POLICY/PROCEDURES DOCUMENTS (MANDATORY)** To be reviewed & signed by Employee.
- 10) VOLUNTARY DEFERRED COMPENSATION PLAN; GREAT-WEST** If you are interested in this benefit, please contact the representative listed on the attached sheet.
- 11) DIRECT DEPOSIT AUTHORIZATION FORM (VOLUNTARY)** For direct deposit to a checking account, attach a copy of a voided check. For a savings account, a deposit slip or bank form showing transit/routing number is required.
- 12) GIC HEALTH INSURANCE PLANS (MANDATORY)** Member information and enrollment forms are available upon request at the Treasurer's office **OR** complete Employee Health Ins Disclosure Form
- 13) LIFE INSURANCE; BOSTON MUTUAL (VOLUNTARY)** Basic Life Enrollment form **OR** Declination Card to be completed by Employee. Voluntary Life and AD& D forms available upon request.
- 14) ALLSTATE HERITAGE AND CONCORD HERITAGE LIFE, CANCER, AND/OR DISABILITY (VOLUNTARY)** Member information and enrollment forms are available upon request.
- 15) HEALTH AND LIFE DECLINATION FORMS (MANDATORY)** To be completed by Employee.
- 16) SENTINEL – Flexible Spending Account (VOLUNTARY)** Information available upon request.
- 17) IMPORTANT: ALL VOLUNTARY ENROLLMENT OPTION FORMS MUST BE COMPLETED AND RETURNED WITHIN 30 DAYS OF EMPLOYMENT TO OBTAIN BENEFITS. AFTER 30 DAYS, ADDITIONS MAY BE MADE DURING YEARLY OPEN ENROLLMENT PERIOD ONLY**