NEW HIRE CHECK LIST

Name: _____   **Date:**_____

NEW HIRE DOCUMENTS:

  APPLICATION: ____

  RESUME:____

  RECOMMENDATION FORM:____

  REFERENCE CHECKS:

   1.____

   2.____

  PA:____

  SERVICE RECORDS:____

  TRANSCRIPTS: _____

  CERTIFICATE: _____

  LICENSE: _____

CRIMINAL HISTORY FORMS:

  AGENCY COPY:____

  DISTRICT COPY:____

Headstart Employees/Drivers Only:

  PHYSICAL/TB TEST: _____

Bus Drivers/Aides Only:

  DPS SCREENING:____   **PHYSICAL/TB TEST:** _____

  CDL HOLDER'S REPORT: _____

Human Resource Use Only:

HQ: _____   **Clearing House:** _____

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