

Facility:	KMH	MERCY	SJH	SOCH	CHS
Name				Phone #	
Address					
City				State	Zip
Employee Signature				Date:	
Social Security #	_____ - _____ - _____		Date of Birth		
Citizenship:		Marital Status	Single	Married	Gender
					Female
					Male

EEOC Code (Please check one) I-American Indian/Native American B-Black/African American
 H-Hispanic/Latino A-Asian/Pacific Islander W-White/Caucasian
****This information is requested of you on a voluntary basis and is used to comply with Federal EEOC and Affirmative Action record keeping requirements****

In case of Emergency, please contact:
 Name _____ Phone Number: (_____) _____

Automobile Information:			BENEFIT CODE		
License Plate #		State	θ NB		
Make		Model			
Color					

Human Resources to Complete

Hire Date				Department Number	
Department				Replacement for	
Position				Hours per pay	
Job Code Number				Status	X FT
					θ PT
					θ Per Diem
Shift				CPR Certif. Copy	Exp. Date
Grade		Step		Rate	
				Working papers	
	Hourly (Exempt Code N)			Salaried (Exempt Code X)	
State Tax				Federal Tax	
State Tax				Federal Tax	
State Tax				Federal Tax	

Employee #		Employee Categories (P/P status):	X F-Full Time	θ S-FT Salaried	θ Z-Physician-FT
			θ P-Part Time	θ V-PT Salaried	θ W-Physician-PT
			θ D-Per Diem		

- AGENCY**
- | | | |
|---|---|---|
| θ AC - Allcare
θ AT - Accountemps
θ AP - Advantage Professionals
θ AO - Apple One
θ BHS - Buffalo Hearing/Speech
θ CB - Ciber
θ CCS - Computer Consulting Svc
θ CP - Computer People
θ CY - Cyncor
θ DSS - Dunhill Staffing
θ EGW - EGW
θ FN - Favorite Nurses | θ FS - Flexible Staffing
θ IN - Intelistaf
θ INT - Interim
θ INTH - Interim Healthcare
θ KEL - Kelly Services
θ KRG - Key Resource Group
θ MSN - Medical Staffing Network
θ MST - Medical Staffing of Buffalo
θ MUE - Mueller Security
θ NF - Nursefinders
θ OT - Office Team
θ PP - Power Personnel | θ PR - Personnel Resource
θ PT - Pro-Temps
θ RHI - RHI Consulting
θ RIS - Remedy Intelligent Staffing
θ SHCS - Supplemental Health Care Service
θ SN - Snelling
X SP - Spherion
θ STR - Superior Technical Resource
θ TAP - Temporary Accounting Personnel
θ TAY - Taylor Services
θ TRAV - Trav Corps
θ WC - Willcare |
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Badge Disclaimer

The following information is needed for the hospitals security and access system. It will be used as authorization for a hospital identification badge, access to specific hospital entrances, time and attendance and to the Parking Lot(s) assigned to you, if applicable. **If you lose your badge, you will be required to pay a \$5.00 replacement fee. You are responsible for returning this ID to HUMAN RESOURCES if you are leaving.**

If this is a temporary badge, please indicate the date of expiration here: _____

Badge #		Template #		Unit #	
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