

# Temporary Employee New Hire Paperwork

- ▶ ***The following instructions are to assist you as you are completing these New Hire Paperwork forms; please read them carefully as you complete each form.***
- ▶ All forms should be completed in blue or black ink *only*. Please print legibly on all forms and complete all forms in their entirety, unless otherwise directed.
- ▶ Do not use white-out on any forms. If you make a mistake, you may *cross off* what you have written and *initial* next to it. On the W-4 and A-4 forms, you may not cross off and initial mistake, you will need to complete a new form.
- ▶ **Your name must be written exactly as it is on your Social Security card, so before you begin, check the spelling of your name on the card to be sure it is correct.**
- ▶ If you have any questions while filling out any of these forms, please call the City of Flagstaff Human Resources Division at (928) 213-2090 and the Human Resources staff can assist you.
- ▶ Once all the forms have been completed, bring them to the Human Resources Division located inside City Hall at 211 W. Aspen Ave. *Please bring the following when you come:*
  - ( Identification for your I-9 (see instructions below).
  - ( Completed forms.
  - ( Social Security Card (for Payroll purposes only)
  - ( Fingerprint clearance card or fingerprint card, if needed (see instructions below).

**If you do not bring these items, we cannot accept your paperwork and your employment date will be postponed.**

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## **Payroll Maintenance Form**

Please complete this form in its entirety, except the shaded boxes, which should be left blank.

1. Endorsements and Restrictions are listed on the back of your driver license.

## **Arizona Form A-4**

This form is to determine the taxes to be withheld from your paycheck by the State of Arizona, and is based on a percentage of your federal income tax withholdings. For further instructions on completing this form, see **Employee's Instructions** at the bottom of the form.

1. Choose check box 1 or 2.

## **Form W-4**

**TIP:**

Remember to select your marital status (check one box only) in box 3.

This form is to determine the amount of federal incomes tax to be withheld from your paycheck.

1. The **Personal Allowances Worksheet** is a worksheet to assist you in determining the number of allowances to claim. It is not required.
2. Complete boxes #1–7 on the bottom half of the form, **Employee’s Withholding Allowance Certificate**, and sign and date the form.
  - a. You must complete either box #5 or box #7, but may *not* complete both.
  - b. Boxes #8–10 are for employer’s use.
3. **Deduction and Adjustments Worksheet** and **Two-Earners/Multiple Jobs Worksheet** are to be completed only if you need them to assist you in filling out the **Employee’s Withholding Allowance Certificate**. They are not required.

## **Form I-9**

**TIP:**

Remember to check one box under “I attest under penalty of perjury that I am:”

This is a federal form used to verify your eligibility to work in the United States. Instructions are available at the front desk in Human Resources, or online at [www.uscis.gov/files/form/i-9.pdf](http://www.uscis.gov/files/form/i-9.pdf).

1. Complete **Section 1. Employee Information and Attestation** *only*.
2. *Do not* complete **Section 2. Employer or Authorized Representative Review and Verification**.
3. When you return the form to Human Resources, you will need to bring identification from the **Lists of Acceptable Documents**. This will include either:
  - a. One (1) item from **List A** or
  - b. One (1) item *each* from **List B** and **List C**.
4. For more detailed instructions on completing the Form I-9, see the instruction pages following the form.

## **Designation of Beneficiary – Final Pay Check**

In the event of your death, Payroll and Human Resources must have information regarding the designation of a beneficiary for your final paycheck.

1. You do have the option to choose to have the check deposited directly into your checking account, as long as your paychecks are being directly deposited. However, you still need to complete the **Primary Beneficiary Information**.
2. If you do not choose direct deposit, *include both beneficiary designations (Primary and Alternate)*.

## **Hazardous Chemicals Training Acknowledgement**

This form is to acknowledge that you have received the **Chemical Hazard Training Program** information. Review the Chemical Hazard Training Program information and keep it for your records, then complete the **Acknowledgement** and bring it with you when you return your paperwork to Human Resources.

## **Drug Free Workplace Administrative Policy Acknowledgement**

This form is to acknowledge that you have received the **Drug Free Workplace Administrative Policy**. Review the policy and keep it for your records, then complete the **Acknowledgement** and bring it with you when you return your paperwork to Human Resources.

## **Direct Deposit/Pay Card Election Form**

**TIP:**

If you use a direct deposit form from your bank as backup, it does not replace the City's Payroll Direct Deposit Authorization form

You may elect to have your paycheck direct deposited into your bank account or loaded onto a Pay Card. If you do not make an election, you will be issued a Pay Card. If you choose Direct Deposit:

1. You can choose up to 3 checking and/or savings accounts to deposit your check into.
2. A voided check or savings deposit slip is *required* for each account. If you do not have checks or deposit slips, you can request a direct deposit form from your bank(s) which will list your account and routing numbers and can be substituted for a voided check and/or savings deposit slip.
3. This form can be completed and turned in to either Human Resources or Payroll at any time during your employment with the City.

## **Non-Discrimination and Anti-Harassment Policy and Acknowledgement Form**

This form is to acknowledge that you have received the **Non-Discrimination and Anti-Harassment Policy** as well as a copy of the **Complaint Procedures Policy**. Review the policies and keep them for your records, then complete the **Acknowledgement form** and bring it with you when you return your paperwork to Human Resources.

### **If you have been directed to obtain fingerprints:**

1. Please go to the Police Department, located at 911 Sawmill. *Be sure you inform them that this is for City of Flagstaff employment; you will not be charged for the fingerprints.* They will roll your fingerprints and return the card to you. **Bring the card with you when you bring your paperwork to Human Resources.**
2. If you have a fingerprint clearance card, you do not need to go to the Police Department for fingerprints, but you must bring your clearance card when you come to Human Resources with your paperwork.

# This Employer Participates in E-Verify



This employer will provide the Social Security Administration (SSA) and, if necessary, the Department of Homeland Security (DHS), with information from each new employee's Form I-9 to confirm work authorization.

**IMPORTANT:** If the Government cannot confirm that you are authorized to work, this employer is required to provide you written instructions and an opportunity to contact SSA and/or DHS before taking adverse action against you, including terminating your employment.

Employers may not use E-Verify to pre-screen job applicants or to re-verify current employees and may not limit or influence the choice of documents presented for use on the Form I-9.

In order to determine whether Form I-9 documentation is valid, this employer uses E-Verify's photo screening tool to match the photograph appearing on some permanent resident and employment authorization cards with the official U.S. Citizenship and Immigration Services' (USCIS) photograph.

If you believe that your employer has violated its responsibilities under this program or has discriminated against you during the verification process based upon your national origin or

citizenship status, please call the Office of Special Counsel at 1-800-255-7688 (TDD: 1-800-237-2515).

## NOTICE:

**Federal law requires all employers to verify the identity and employment eligibility of all persons hired to work in the United States.**

**Employment Verification.**  **Done.**

For more information on E-Verify, please contact DHS at:  
**1-888-464-4218**



E-VERIFY IS A SERVICE OF DHS AND SSA

## MEMORANDUM

**TO: Temporary Employees - City of Flagstaff**

**FROM: Human Resources**

**RE: Arizona State Retirement Contributions**

Arizona State Retirement (ASRS) membership is a mandatory condition of employment for any employee who meets the eligibility criteria defined in statutes A.R.S. 38-711 and 38-727. A qualifying employee cannot reject membership; employees who do not meet eligibility criteria cannot choose membership. The employee must contribute on a pre-tax basis through payroll deduction and the City will match the contribution made by the employee. Once contributions start in any part of the fiscal year July 1 through June 30, contributions must continue until the end of the fiscal year.

If you work at least 20 hours a week for at least 20 weeks in the fiscal year, you become a member of the ASRS. The 20/20 hour criteria does not have to be consecutive. Meaning, if you sometimes work less than 20 hours in the week, you become eligible the start of the 20<sup>th</sup> week of working 20 or more hours in the fiscal year.

Each employee who meets ASRS membership qualifications will be notified by Human Resources, at which time you must visit [www.azasrs.gov](http://www.azasrs.gov) and complete the enrollment and beneficiary information. The Beneficiary Form reflects the member's choice of the person to receive the survivor benefit in the event of the member's death before retirement. You may assign one primary or multiple primary co-beneficiaries. You may also assign a secondary beneficiary in the event the primary beneficiary assignment is no longer valid. If you assign multiple primary or secondary beneficiaries, you must indicate the percentage of the survivor benefit to be paid to each assigned beneficiary.

Please feel free to ask for assistance in completing the Enrollment and Beneficiary Forms.

Thank you and welcome to the City of Flagstaff,