

PLEASE PRINT

**DIOCESE OF SACRAMENTO  
PERSONNEL TRANSACTION: EMPLOYMENT**

<b>EMPLOYER</b>  Circle One: Parish, School or Agency	SITE:	CITY:	ADP COMPANY CODE:  FACILITY CODE:
<b>EMPLOYEE NAME</b>	LAST:	FIRST	M. I.:
<b>SOC SEC NO</b>			
<b>HOME ADDRESS</b>			
<b>CITY, STATE, ZIP CODE</b>			
<b>TELEPHONE NUMBER(S)</b>	HOME: (    )	CELL: (    )	
<b>DATES</b>	BIRTHDATE:	ORIGINAL HIRE DATE:	REHIRE DATE:
<b>POSITION</b>	TITLE:	RANGE/CLASS/GRADE:	STEP:
	SUPERVISORY POSITION: <input type="checkbox"/> NO <input type="checkbox"/> YES . IF YES, EMAIL ADDRESS REQUIRED EMAIL ADDRESS;		
<b>CLASSIFICATION</b>	<input type="checkbox"/> REGULAR FULL-TIME <input type="checkbox"/> REGULAR PART-TIME ( <i>REGULARLY SCHEDULED TO WORK 20 HOURS/WEEK</i> ) <input type="checkbox"/> OCCASIONAL PART-TIME ( <i>LESS THAN 20 HOURS/WEEK</i> ) <input type="checkbox"/> TEMPORARY ( <i>NOT ELIGIBLE FOR PAID LEAVE, HEALTH, LIFE, OR PENSION BENEFITS</i> ) <i>(NOT TO EXCEED 180 DAYS)</i>		
<b>FLSA CODE</b>	<input type="checkbox"/> NON-EXEMPT (ELIGIBLE FOR OVERTIME COMPENSATION) <input type="checkbox"/> EXEMPT (FROM OVERTIME COMPENSATION REQUIREMENTS)		
<b>WORK SCHEDULE</b>	<input type="checkbox"/> FULL-TIME: _____ HOURS / WEEK <input type="checkbox"/> PART-TIME: _____ HOURS / WEEK <input type="checkbox"/> REGULAR STANDARD WORK WEEK _____		
<b>RATE OF PAY</b>	\$ _____ PER HOUR PAY FREQUENCY: SEMI MONTHLY	\$ _____ PER PAY PERIOD DAY (Substitute Teacher)	

\_\_\_\_\_  
Pastor / Principal / Supervisor

\_\_\_\_\_  
Date

ORIGINAL TO: EMPLOYEE PERSONNEL FILE

COPY TO: PAYROLL

COPY TO: HUMAN RESOURCES/LAY PERSONNEL

2110 BROADWAY  
SACRAMENTO, CA 95818-2541

PT 100 (4/11)