

New Hire (Form)

Employee Name:

Address: _____

Phone #: _____

Email: _____

Department/Property: _____

Job Description:

- General Manager
- Assistant Manager
- Concierge
- Service Technician
- Custodian
- Grounds
- District Manager
- Other: _____

Status: Full Time Part Time

Wages:

Salary: _____ Annual
 Hourly Rate: _____ Per Hour
 Exempt
 Phone Allowance: _____
 Auto Allowance: _____

Shift:

#	Shift	Lunch
1	Open Shift	N/A
2	M-F: 9:00 a.m. - 6:00 p.m.	60 min
3	M-F: 8:30 a.m. - 5:30 p.m.	60 min
4	9:00 a.m. - 5:30 p.m.	30 min
5	8:00 a.m. - 5:00 p.m.	60 min
6	8:30 am - 5:00 pm	30 min

Aquired:

PTO Rollover: _____ Hours
 Current Insurance Benefits: _____
 Background Check Waiver Signed?
 Drug Test Packet Provided?

Division:

- Denizen Management
- Anderson Birkla
- Allied Diversified

Approval:

Signature: _____
 Print Name: _____
 Title: _____

