



Diocese of Palm Beach

Employee Data Form Instructions for New Hires

Benefits Office – For all employees

1. Submit all executed Employee Data Forms to the Employee Benefits Office via fax 561-775-9575 or scan and upload to the employee services folder and notify Gretchen Wood and Sandy Maulden of the upload.
 - o W-4
 - o Direct Deposit Form
 - o Workers Compensation at a Glance
 - o Health Insurance Marketplace Notice Acknowledgement form
 - o 403B New hire enrollment kit acknowledgement form
 - o Acknowledgment Regarding Receipt of Explain My Benefits (30+hrs. /week)

Benefits Questions – Contact Sandy Maulden, Benefits Assistant at 561-775-9574 or smaulden@diocesepb.org

HR Questions – Contact Gretchen Wood, HR Coordinator at 561-775-9503 or gwood@diocesepb.org

FOR SCHOOLS ONLY:

Office of Catholic Schools (OCS) – Fax: 561-775-9545

1. **All New Hires (Instructional & Non-Instructional)** – Please submit employee data form (page 2) and documentation, if applicable (see below) to the Office of Catholic Schools.
2. **Instructional Personnel Packet for New Hired Teachers/*Guidance Counselor**
 - a. **Mail via USPS, together in ONE packet, all that applies below, along with this checklist to OCS**
 - i. _____ Employee Data Form
 - ii. _____ Original Teacher Agreement or Original First-Year Teacher Letter Agreement (all 4 pages)
 - iii. _____ Original Interim Teacher Job Description
 - iv. _____ Copy of Professional/Temporary FL or Out-of-State Certificate
 - v. _____ Copy of Statement of Eligibility (SOE)
 - vi. _____ Copy of Transcript ONLY for those with NO Florida Certificate
 - vii. _____ For Middle-School Religion Teachers, include Copy of Level II Catechist Certification as determined by the Diocesan Office of Catechesis or Theology/Religious Studies Degree Transcript
 - viii. _____ For High School Religion Teachers, include Copy of Level III Catechist Certification as determined by the Diocesan Office of Catechesis or Theology/Religious Studies Degree Transcript
 - ix. _____ *For Counselors, Include Copy of License or State Certification

NOTE FOR TEACHERS:

- Teachers without certification in the field you are hiring for must comply with diocesan policies for obtaining the required certification for employment.
- All necessary requirements must be completed by September 30 of the current school year and reviewed by Superintendent/Assistant Superintendent for continued employment.
- If required by the FDOE “Statement of Eligibility,” Non-Certified Special Area Teachers must take and pass the Subject Area Exam (SAE) in the field that they are teaching by December 31 of the current school year.
- All classroom teachers, including special area teachers and interim teachers must have a four-year degree.
- Classroom Teacher Assistants/Aides must have a minimum of an AA degree.

NOTE: Non-Contractual Instructional Personnel include: CLASSROOM Teacher Assistants/Aides, Substitute Teachers and Interim Teachers.

3. **Non-Instructional/Non-Contractual Personnel Packets for New Hires**

- a. All personnel, not in a teaching capacity, must have a specific job description that reflects their essential duties and responsibilities, qualifications and physical requirements.
- b. **Fax or Upload to the FTP Education Folder, all that applies below together, to OCS**
 - i. _____ Employee Data Form
 - ii. _____ Copy of signed and dated Job Description
 - iii. _____ For Nurse, include copy of License

NOTE: Non-Instructional Personnel employees may be classified as exempt or non-exempt, based on their job description. Non-exempt, Non-Instructional school employees are hourly employees and are paid an hourly rate.

Examples: Maintenance, Cafeteria, Office/Clerical, Extended Day/After Care, Development, Clinic, Registrar, Bookkeeper, Clerk, Bus, Security, After-School Coaches, etc.

Education Questions -- Contact Louise Galgano, Administrative Assistant OCS 561-775-9547 or lgalgano@diocesepb.org



Diocese of Palm Beach

Employee Data Form

All Entities: This form needs to be faxed to the HR Office at 561-775-9575 along with other required documents.

Schools: This form also needs to be faxed to the Office of Catholic Schools at 561-775-9545 along with other required documents.

Type of Change (Check One):

- New Hire Inactivate Position Termination (please select a reason below and enter last day worked, last day paid and last pay date (Final Check).
- Rehire Activate Position Resignation (Please include a letter or email)
- Seasonal Employee Death
- Transfer Retirement
- Change of Data

Last Day Worked: _____ **Last Day Paid:** _____ **Last Pay Date (Final Check):** _____

Family & Medical Leave (FMLA) – Paid Leave

Start Date: _____
End Date: _____

Family & Medical Leave (FMLA) – Unpaid Leave

Start Date: _____
End Date: _____

Return to Work Date:

Today's Date: _____ Effective Date: _____

Entity Name: _____ Entity Number: _____ Department Number: _____

Transferring To: _____ Entity Number: _____ Department Number: _____

Employee Name: _____

Last Name First Name Middle Initial

Mailing Address: _____

City: _____ State: _____ Zip Code: _____ County: _____

Home Phone: _____ - _____ - _____ Cell Phone: _____ - _____ - _____

Date of Birth: _____ / _____ / _____ Social Security Number: _____ - _____ - _____

Gender: ___ Male or ___ Female Marital Status: _____ Single or _____ Married

Email: _____

Job Title: _____ Supervisors Name: _____

10 Month Employee **OR** 12 Month Employee
 Non-Instructional Employee **OR** Instructional Employee

FLSA Classification (Please select Non-Exempt OR Exempt)

<input type="checkbox"/> Non-Exempt <input type="checkbox"/> Hourly Rate <input type="checkbox"/> Hours Worked Per Week	<input type="checkbox"/> Exempt <input type="checkbox"/> Annual Salary <input type="checkbox"/> Hours Worked Per Week	<input type="checkbox"/> Exempt Musicians <input type="checkbox"/> Hours worked per week <input type="checkbox"/> Rate per Rehearsal <input type="checkbox"/> Rate per Mass	<input type="checkbox"/> Exempt Clergy <input type="checkbox"/> Annual Salary <input type="checkbox"/> Hrs. Worked Per Week <input type="checkbox"/> Mass Intention Rate <input type="checkbox"/> Weekend Mass Rate <input type="checkbox"/> Weekday Mass Rate <input type="checkbox"/> Stole/Other
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Pastor/Principal/Administrator Signature: _____

Pastor/Principal/Administrator Printed Name: _____

Date Signed: _____

***Pastor/Principal Administrator Signature is **ALWAYS** required except for change of address or telephone number

Form Completed By: _____ **Title:** _____

Email: _____ **Phone Number:** _____ - _____ - _____

Date Signed: _____

Employee Signature: _____ **Date Signed** _____

ATTENTION: SCHOOLS MUST FILL OUT THIS SECTION FOR ALL EMPLOYEES

US Citizen: ___ Yes ___ No **Gender:** ___ Male ___ Female **Catholic:** ___ Yes ___ No **Laity or Religious:** _____

Highest Educational Degree: _____ Field of Study: _____

Years of Instructional/Administrative Work Experience Outside the Diocese of Palm Beach: _____

Years of Instructional/Administrative Work Experience Within the Diocese of Palm Beach: _____

Years of Non-Instructional Work Experience Outside the Diocese of Palm Beach: _____

Years of Non-Instructional Work Experience Within the Diocese of Palm Beach: _____

Catechist: ___ Foundation ___ Level One ___ Level Two ___ Level Three _____ BA or Masters in Theology/Religious Studies

Background Check Clearance Date: _____ Protecting God's Children Workshop Attendance Date: _____

Emergency Contact Name: _____ Emergency Contact Phone Number: _____