

**Employee Information for On Boarding:**

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| --- | --- |
| Full Name: (Last, First, MI) |  |
| Date of Hire: (Start Date) |  |
| Rate of Pay: | Hourly: \_\_\_\_\_\_\_\_\_\_ Salary\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | Full Time / Part Time |
| Position: |  |
| Personal E-Mail: (Email goes to personal email address in box for directions for Paylocity) |  |
| Entity name and city: |  |
| Entity number (if known) |  |
| Position Supervisor: |  |
| Number of Hours Work Per Day: |  |
| Will you record hours in WEBTIME for this Employee? |  |

Please email this information to Faith Eschenfelder at [fje@dosp.org](mailto:fje@dosp.org)