HARTNELL COLLEGE

DATA SHEET FOR ADJUNCT INSTRUCTOR

Human Resources & Equal Employment Opportunity

☐ Dr.
☐ Mr.
☐ Ms.

_____
Last Name First Name MI

Address: _____
Street

_____
City State Zip

Home Phone: _____ E-Mail Address: _____

Social Security #: _____ Birth Date: _____ Sex: ☐ Female ☐ Male

Semester you will be teaching: Fall 20 _____ Spring 20 _____ Summer 20 _____

AREA

☐ Fine Arts/Social Science/Language Arts ☐ Physical Education ☐ Student Services ☐ Counseling
☐ Math/Science/AHT ☐ Occupational Education ☐ Library ☐ Theatre Arts
☐ Nursing ☐ King City Center ☐ ALC

RETURN WITH THE FOLLOWING FORMS - DEPARTMENT USE ONLY

☐ Fingerprints (Appointment Scheduled) ___/___/___ (or Taken) ___/___/___
☐ Valid Negative TB Report (Appointment Scheduled) ___/___/___ (or Taken) ___/___/___
☐ Demographic Information *(Form HR-36)*
☐ Employee's Withholding Allowance Certificate *(Form W-4)*
Must include a copy of Social Security Card
☐ Employment Eligibility Verification *(Form I-9)*
☐ Certificated Personnel Information Form *(Form HR-24X)*
☐ Retirement Questionnaire *(Form HR-I9)*
☐ STRS Permissive Election and Acknowledgment of Receipt of CALSTRS Defined Benefit Plan Membership Information *(Form ES 350)*
☐ Statement Concerning Your Employment in a Job Not Covered by Social Security *(Form SSA-1945)*
☐ Physician Designation Form *(Form HR-20)*
☐ Warrant(s) Recipient Designation *(Form HR-17)*
☐ Standards of Employment/Service Agreement *(Form HR-16)*
☐ Automatic Deposit Authorization *(Form HR-25X)*

Payroll ___/___/___
Access __/___/___
MCOE ___/___/___
Datatel ___/___/____