EMPLOYEE RECRUITING CHECKLIST
(Faculty/Staff benefits eligible positions only)

Name:_________________________________________  TechID(R#)________

Position:_______________________________________   Hire Date:_____________

Required forms/documents that must accompany the Personnel Action Form:

___ Employment Application (signed by employee)

___ Employment History Verification Form(s) (Attachment F, OP 70.11)

___ Offer Confirmation Letter

___ College/University Transcript (if applicable)

___ Vita (faculty positions only)

___ Professional Certifications/Affiliations (if applicable)

___ Security-sensitive Positions
  • Criminal History Background Check Return Notice – Level I & II
    (Attachment B, OP 70.20)
  • Consent to Drug and Alcohol Testing – Level II only
    (Attachment D, OP 70.20)
  • Email/Notice confirming employee passed drug screening – Level II only

____________________________________                  _________________________
Department Name                                            ePAF Preparer                  Date