

Human Resources Services

PARISH and AGENCY NEW EMPLOYEE CHECKLIST/PERSONNEL FILE GUIDELINES

Please date each action as it is performed. Upon completion of all items, the new employee and pastor/supervisor will sign and date this checklist and place it in the personnel file.

PRE-INTERVIEW CHECKLIST:

Employee Name _____

| DATE | ITEM | REQUIRED ACTION |
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| | Is the potential employee a practicing Catholic? | If the candidate meets the criteria, proceed. If the candidate does not, please contact Anna Schiele at (916) 733-0240. |
| | Pre-application, Questionnaire, and Application are signed and complete <ul style="list-style-type: none">• Confirm the candidate has provided at least 3 references with phone numbers• Pastor/Supervisor confirms and approves that all questions are answered and are accurate | If hired, place in site Personnel File. It is important that the Pastor/Supervisor reads and reviews these documents thoroughly. |
| | Resume provided | Pastor/Supervisor Review. If hired, place in site Personnel File. |

POST-INTERVIEW/PRE-OFFER CHECKLIST:

| DATE | ITEM | REQUIRED ACTION |
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| | Complete 3 Reference Check Forms | Pastor/Supervisor conducts reference checks with previous supervisors listed on the employment application (PT 80) and documents conversations with each on the Reference Check Form attached at the end of this document. |

POST-OFFER/PRE-HIRE CHECKLIST: (Hire contingent upon successful completion)

| DATE | ITEM | REQUIRED ACTION |
|------|--|--|
| | Complete Background Check for applicable positions. | Pastor/Supervisor follows “Steps for Conducting a Background Check” found on Diocesan website and waits for clearance. |
| | Fingerprint Clearance Date: DOJ_____ FBI_____ | Fax Live Scan Verification form to Safe Environment Office: (916) 733-0195. Once cleared, please record date on this form. |

FIRST DAY OF EMPLOYMENT:

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| | Complete New Employee form (PT100) <ul style="list-style-type: none"> If the new hire is a Religious please use the Religious PT Form instead of the PT100 | Original placed in site Personnel File. Contact Lay Personnel for all Religious new hires at personnel@scd.org or (916) 733-0239 |
| | Employee completes required safe environment and sexual harassment training through CMG Connect: Parish Employees: https://sacramento.cmgconnect.org/ School Employees: https://sacramento-schools.cmgconnect.org/ Charities/Agencies Employees: https://sacramento-charities-camps.cmgconnect.org/ Pastoral Center Employees: https://sacramento-pastoral-center.cmgconnect.org/ | Pastor/Supervisor verifies Safe Haven and Sexual Harassment training is complete. Send certificate of completion to Lay Personnel at personnel@scd.org . Place original Certificate of Completion in the site Personnel File. |
| | Complete I-9 | Original place in I-9 file at the site – NOT IN PERSONNEL FILE |
| | Employee completes W-4 and DE 4 | Original placed in site Personnel File. |
| | Direct Deposit Authorization Form PT 800 (voided check required) OPTIONAL | Original placed in site Personnel File. |
| | Employee is given copy of job description; Pastor / Supervisor and employee discuss key elements | Original placed in site Personnel File. |

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| | <p><u>Pastor/Supervisor</u> reviews the Lay Personnel Employee Handbook <u>in person</u> with the employee. Provide the employee with a copy to keep. Employee signs and dates the following acknowledgment forms: <i>Acknowledgement of Receipt of Handbook (pages 55-56)</i> <i>Acknowledgement of Diocesan Policies as Religious Employer (page 57)</i> <i>Antidiscrimination/Anti-harassment Policy Acknowledgement (page 58)</i> <i>Electronic Communications Policy Acknowledgement (page 59)</i></p> | <p>Originals placed in site Personnel File.</p> |
| | <p><u>Pastor/Supervisor</u> reviews the Arbitration Agreement <u>in person</u> with the employee. Employee and Principal both sign and date the Arbitration Agreement.</p> | <p>Originals placed in site Personnel File.</p> |
| | <p>Employee is advised of required State of California online Sexual Harassment Course (All employees are required to complete; non-supervisors take the one-hour training and managers/supervisors take the two-hour training.</p> | <p>The training is completed on CMG Connect. Work or personal email address to register is acceptable.</p> |
| | <p>Employee completes and submits Emergency Information form (PT 120)</p> | <p>Place original in site Personnel File and copy in site binder.</p> |
| | <p>Employee is given fiscal year Employee Holiday list /and or school calendar.</p> | <p>Discussion item only</p> |
| | <p>Employee is given New Hire Memo for State-Required New-Hire Documents</p> | <p>Discussion item only</p> |
| | <p>Employee is given copy of Disability Insurance brochure (DE 2515)</p> | <p>Discussion item only</p> |
| | <p>Employee is given copy of Paid Family Leave brochure (DE 2511)</p> | <p>Discussion item only</p> |
| | <p>Employee is given copy of SDI/PFL Weekly Benefit Amounts (DE 2589)</p> | <p>Discussion item only</p> |
| | <p>Employee is given copy of Sexual Harassment brochure (DFEH 185)</p> | <p>Discussion item only</p> |
| | <p>Employee is given copy of Facts about Workers' Compensation pamphlet with the Pre Designation of Personal Physician included in pamphlet. (Employee is not required to sign this; only if employee chooses to)</p> | <p>If signed, place in Personnel File</p> |
| | <p>Employee is asked to read IIPP (Injury and Illness Prevention Program). Ensure each employee is provided a copy of the Infectious Disease Preparedness and Response Plan.</p> | <p>Employee signs New Employee Safety Orientation Checklist (page 4a in IIPP). This signed document is placed in Personnel File at the site.</p> |

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| Employee is provided with access to Time Reporting System (ADP) and time reporting forms PT 501 Time Off Request, PT 400 Employee Request For Leave and the following forms to hourly employees only: PT502 Meal/Break Waiver Form, PT503 Punch Correction/Missing Punch Request Form, PT505 Make up Time Form, PT510 Overtime Request Form. | Discuss vacation/sick time accruals. |
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The Pastor/Supervisor and the employee discuss diocesan employee benefits; eligible employees (regularly scheduled to work 20 hours or more per week) are provided a copy of the *RETA Trust User Guide*, a *Group Benefit Plans Premium Sheet* and the *Employee Benefits Brochure*. Details on all of the group benefit plans, including the *Summary of Benefits and Coverage* as well as the *Evidence of Coverage* can be found online at the RETA Trust home page.

Non-Optional Benefits

| DATE | ITEM | REQUIRED ACTION |
|------|--|--|
| | The benefit administrator will “add” a new eligible employee to the RETA Trust database. This action will enroll the employee in Basic Life/AD&D and Long Term Disability Insurance. | The employee will need to designate their beneficiary information online |
| | 403(b) Enrollment Guide and Forms | Discussion and explanation |
| | 403(b) Beneficiary Designation Form (807165) | Copy to Office of Lay Personnel. Original placed in site Personnel File. |

Optional Benefits

| DATE | ITEM | REQUIRED ACTION |
|------|---|---|
| | After the benefit administrator has added a new eligible employee to the RETA TRUST database, the employee will log onto https://www.retatrust.org/c/home to register as a new user. | Benefit Administrator needs to verify no later than 21 days after being hired that the employee has taken action. |
| | The employee will use the Enrollment section of the website to elect/decline benefit coverages for themselves and for their dependents. | Enrollment must be completed within 30 days of being hired. |
| | At the end of the online enrollment process, the employee will print and sign their “Enrollment Summary”. The signed summary will be submitted to the bookkeeper to support the selections the employee has made. | Benefit Administrator must ensure completed before payroll deductions are made. |

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| | Benefit Payroll Deduction Authorization Form (PT1001) | Copy to Payroll Original to be placed in Personnel File Copy to Employee |
| | Section 125 Employee Benefit Election Form (PT10) (pre-tax deductions for medical/dental/vision) | Copy to Payroll Original to be placed in Personnel File Copy to Employee |
| | 403(b) Plan – The Standard | Provide employee with current 403(b) booklet. |

Pastor/Supervisor Name

Pastor/Supervisor Signature

Date

Employee Name

Employee Signature

Date

Reference Check Form

REFERENCE CHECKS SHOULD BE CONDUCTED WITH PREVIOUS SUPERVISORS LISTED ON THE EMPLOYMENT APPLICATION (PT 80)

Name of person completing the reference check: _____

Date reference check completed: _____

Name of person contacted: _____

Position of person contacted: _____

Questions to ask during the reference check:

1. How long have you known the applicant? _____
2. When did the applicant work for (or with) you? _____
3. In what role did you serve in relation to the applicant? (For example, were you their supervisor, peer, etc.?) _____
4. What are the applicant's strengths? _____

5. Are there any areas of challenge for the applicant? _____

6. Would you hire the applicant again? _____

_____ Reference refused to answer questions and would only confirm dates of employment.