

Diocese of Salt Lake City

27 C STREET SALT LAKE CITY, UTAH 84103-2397 TELEPHONE (801) 328-8641 FAX (801) 328-9680

Diocesan New Hire

27/

Fax to 801 328-9680 or mail -	- Attn: Finance Office
Location	
Employee Name	
Address	
City, State, Zip Code	
Soc Sec # / Phone Number	Phone #
Gender	M or F Date of Birth
Ethnicity (circle one)	Caucasian Black or African American Asian American Indian
	Hispanic Native Hawaiian or Pacific Islander Two or more races
Date of Hire (this location)	Original Diocesan DOH
Occupation / Job Category	Job Category
Salary/Wages	Salaried Hourly
Number hours per week	Will qualify for Pension January
Health Insurance	Yes or No or N/A (working less than 30 hours per week)
Waiver	Yes or No IF YES >> Insured elsewhere? Yes or No
Driver of Diocesan vehicle?	Yes or No IF YES >> Copy Driver's License
Utah New Hire Registry	I-9 Certification W-4 .
Dio	cesan Employee Termination
Termination Date	
Hours Calendar Year to Date	
Wages Calendar Year to Date	
COBRA	Yes or No Send Election to Diocese
Transfer to Diocesan entity	Yes or No IF YES, where?
Precision Planning Form	
Accrued vacation pay	
Severance pay	
Reason for leaving	