FY 23 EPIC Full-Time New Hire Checklist

EPIC ID #	
EPIC Email	
Set up in WVEIS _	
Set up in POS	

Employee:	Set up in POS
Position:	
Program Location & Supervisor:	
Employee's Current email address:	
	entation included in the file or are completed.)
Job Posting/Description Included Check here if county request w/o posting Application showing 3 references	Salary Classification
	Number of workdays per FY
References Checked Employment Letter Signed	# of years of experience verified
Proof of Vaccination if Required	Salary
	Returned/Cleared or Vetted via WVDE
I-9 Form Completed	For EPIC Office Hires Only
IT 104 Completed W-4 Form Completed	W/O complete for phone/computer set up
Direct Deposit Form w/ Voided Check Number of Pays (20/24 if applicable)	Phone #
Staff Emergency Form Completed	Safety Training
Non-Disclosure Agreement CompleteAcceptable Use Policy	P Card if applicable
Drug Free Workplace EPIC Handbook Acknowledgement F Copy of Driving Record and/or Physic Mandated Reporting Training Acknow Employee Badge Made Added to New Hire Spreadsheet for J	cal (circle if applicable) vledgement Form
Official Start Date	