



**STAFF SUMMARY SHEET**

**NAME:** \_\_\_\_\_

**ADDRESS:**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SOCIAL SECURITY #:** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**HIRE DATE:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **D.O.B.:** \_\_\_\_/\_\_\_\_/\_\_\_\_

The following items are current and recorded in the above named employee file.

- Application for Employment
- 3 Written Reference Forms
- Employee Medical Statement (expires every 3 years)
- Copy of High School Diploma or Equivalence
- Non-Conviction Statement
- BCI & I Report
- Form W4
- Form I-9
- Statement of Receipt of Handbook
- Emergency Information
- First Aid Training
- Communicable Disease Training
- Child Abuse Recognition Training
- Infant/Child CPR Training
- Other:

\_\_\_\_\_  
\_\_\_\_\_  
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