

NEW HIRE REPORTING FORM (NH-1, Rev 9/97)

636000963

00018

EMPLOYER NAME

LAWRENCE BD OF EDUCATION

MARK ONE OF THE FOLLOWING BOXES: New Hire ☐ Recall ☐ Job Refusal ☐

Mark box like this

NOT
like thi

☒

△

SOCIAL SECURITY NUMBER

FIRST DAY OF WORK
(OR DATE OF REFUSAL)

EMPLOYER REPRESENTATIVE PHONE NUMBER
(Only in case of job refusal)

E

-

-

MM DD YYYY

$$(\begin{array}{|c|c|c|} \hline & & \\ \hline \end{array}) \begin{array}{|c|c|c|} \hline & & \\ \hline \end{array} - \begin{array}{|c|c|c|} \hline & & \\ \hline \end{array}$$

LAST NAME

FIRST NAME

MI

1

[illegible][illegible]

--	--

2

STREET NUMBER

STREET NAME OR RURAL ROUTE AND NUMBER

P.O. BOX NUMBER

OR

CITY

STATE

ZIP CODE

3

[illegible]

--	--

--	--	--	--	--

THE ABOVE INFORMATION IS TRUE AND CORRECT

EMPLOYEE Signature

Date _____

EMPLOYER

Representative Signature

Date _____

PLEASE MAKE YOUR CHARACTERS LIKE THE SAMPLES BELOW:

A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U	V	W	X	Y	Z
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

1	2	3	4	5	6	7	8	9	0
---	---	---	---	---	---	---	---	---	---

SECTION E – Employer should enter or verify social security number, first day of work, and whether new hire, recall or refusal. (Job-refusal reports should be completed in their entirety by the employer, including phone number.)

SECTIONS 1, 2, and 3 - May be completed by the employer or employee. Enter employee information indicated on the report form as shown by the example.

The form must be signed by the employee (if available) and the employer (or representative) except for job refusals, which require only the employer's signature.

COMPLETE ONE FORM PER INDIVIDUAL, PRINT IN UPPER CASE LETTERS,
WRITE WITHIN THE BOXES, AND USE ONLY BLACK OR BLUE INK.