

NEW EMPLOYEE CHECKLIST FOR APPOINTMENT PAPERWORK

AO 78 Application For Judicial Branch of Employment

- Where dates are requested throughout the application, ensure **all dates a correct and completed using the following format MM/DD/YYYY**
- Complete **ALL** questions #1 through #6. **#6 Please print your Date of Birth as MM/DD/YYYY even if that line indicates “complete only for law enforcement only” .**
- #7 - #15 complete **in its entirety**
- #16 a High School Diploma received on **MM/DD/YYYY**
- Complete the remaining questions in #16 through #18 (if #18 checked as “Yes” complete #18b using the format of MM/DD/YYYY.
- Under Work Experience, it is important that Dates of Employment using the following format MM/DD/YYYY for proper title and/or salary qualification.
- Page 5. Under Applicant’s Certification, please sign and date – **electronic signature not acceptable**

I-9 Employment Eligibility Verification form

- Page #1 is to be completed in its entirety signed and dated - **electronic signature not acceptable**
- Page #2 is completed by the local HR representative. Please make sure a legible copy of one’s U.S. Passport OR valid Driver’s License AND Social Security card is provided along with this form .

Fast Start Direct Deposit

- Section #1 complete in its entirety
- Section #2 check type of account box; and check type of payment “net pay” box

- Section #3 includes bank account **nine (9)** digit routing number (8 numbers in first 8 boxes; and 1 number in the last check box). Account title is the name(s) in the bank account; and the financial institution's name.
- Section #4 is only to be completed if you elect allotment, i.e., allocation of monies to go into a different savings or checking account
- Section #5 please sign and date – **electronic signature not acceptable**

W-4 Employee's Withholding Allowance Certificate

- Section #1 complete with first and last name with address
- Section #2 complete with Social Security number
- Section #3 Marital status is checked
- Section #5 as appropriate the total number of allowances to be claimed
- Please sign and date form - ** electronic signature not acceptable**
- Section #8 leave blank for local HR Representative to complete

New Jersey NJ-W4 State tax form (If employee lives in another state please provide other

State or if applicable City Tax/Resident form(s))

- Section #1 through section #6 are to be completed
- Sign and date form – ** electronic signature not acceptable**
- Leave section under signature blank, local HR representative will complete

Please check that all items noted above are reviewed and checked off prior to submitting to the respective Human Resources Representative. Please do NOT take a photograph of these required documents. Documents must be scanned and returned as a PDF file.

Print Employee Name and Initial

Date