

REQUIRED DOCUMENTATION FOR NEW HIRE

NAME \_\_\_\_\_

FRONT AND BACK COLOR COPY OF CDL \_\_\_\_\_

COPY OF MEDICAL CARD \_\_\_\_\_

COPY OF SOCIAL SECURITY CARD \_\_\_\_\_

CERTIFIED MVR \_\_\_\_\_

APPLICATION \_\_\_\_\_

PREVIOUS EMPLOYMENT CHECKS \_\_\_\_\_

NEW HIRE PACKET COMPLETED \_\_\_\_\_

STATE TAX FORMS \_\_\_\_\_

FEDERAL TAX FORMS \_\_\_\_\_

I-9 \_\_\_\_\_

DRUG TEST \_\_\_\_\_ WITH RESULTS \_\_\_\_\_