

# River Valley Child Development Services New Hire Request Form



**Candidate Information**

Candidate Name: \_\_\_\_\_ Date of Request: \_\_\_\_\_  
 Position Title: \_\_\_\_\_ Program: \_\_\_\_\_  
 Assigned Worksite: \_\_\_\_\_ Hiring Director: \_\_\_\_\_

**Supervision Information**

Direct Supervisor Name: \_\_\_\_\_ Position Title: \_\_\_\_\_  
 Secondary Supervisor Name: \_\_\_\_\_ Position Title: \_\_\_\_\_  
 Tertiary Supervisor Name: \_\_\_\_\_ Position Title: \_\_\_\_\_

**RVCDS Classification**

- Full-Time Employee # hours scheduled per week \_\_\_\_\_
- Part-Time Employee # hours scheduled per week \_\_\_\_\_
- Temporary Employee # hours scheduled per week \_\_\_\_\_ length of time \_\_\_\_\_
- Substitute Employee

Position eligible for work from home benefit?  Yes  No

**Education and Experience Information**

Education Level: \_\_\_\_\_ Field of Study: \_\_\_\_\_  
 Years of Experience: \_\_\_\_\_ Relevant Exp. \_\_\_\_\_  
 Waiver Required? \_\_\_\_\_ Waiver Approved By: \_\_\_\_\_  
 Other relevant information (licenses, training, etc.) \_\_\_\_\_

\_\_\_\_\_  
*Hiring Director Signature*

\_\_\_\_\_  
*Date*

**Human Resources Section**

**Pay Rate**

Pay Rate Level: \_\_\_\_\_ Hourly Rate: \_\_\_\_\_ Bi-Weekly Rate: \_\_\_\_\_ Annual Rate: \_\_\_\_\_

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> App Complete and Signed in Paycom       | <input type="checkbox"/> Phone Interview Questions | <input type="checkbox"/> Proof of Education              |
| <input type="checkbox"/> Resume                                  | <input type="checkbox"/> Interview Questions       | <input type="checkbox"/> Unofficial proof                |
| <input type="checkbox"/> 2-3 Letters of Reference (professional) | <input type="checkbox"/> Interview Project         | <input type="checkbox"/> Official proof                  |
|  | <input type="checkbox"/> Interview Rating Form     | <input type="checkbox"/> Approved Waiver (if applicable) |

<b>Hire Date</b>
to be completed by HR after offer made

\_\_\_\_\_  
*Human Resources Generalist Signature*

\_\_\_\_\_  
*Date*

**Agency Review and Determination**

**Pay Rate Verification**

\_\_\_\_\_  
*Comptroller Signature*

\_\_\_\_\_  
*Date*

**Hire Determination**

Approved  Denied

\_\_\_\_\_  
*Executive Director Signature*

\_\_\_\_\_  
*Date*