

CLASSIFIED EMPLOYEE PERSONNEL FILE CHECKLIST
(Attach to inside front cover of each employee's file)

SCHOOL: _____

Teacher's Name: _____

Address: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Date of Employment: _____ Date of Termination: _____

Date of Birth: _____ Social Security Number: _____

DOCUMENTATION	20__/__/__	20__/__/__	20__/__/__	20__/__/__	20__/__/__
ANNUALLY					
1. School Staff Form or Compensation Rates for Classified Staff					
2. Evaluation Forms completed annually (dated, signed, etc.)					
3. Child Abuse Acknowledgement Form (current year)					
4. Adults Interacting with Minors Form					
5. Electronic Communications Form					
6. Other Form: _____					
7. Proof of freedom from T.B. (renewed every 4 years) Date of Expiration _____					
8. Record of Inservice					
9. VIRTUS® Training (current)					

AT TIME OF EMPLOYMENT	
1. Application Form	
2. Resume	
3. References: Telephone Checks/Forms/Letters	
4. Verification of previous experience	
5. Official Copy of Transcripts (if applicable)	
6. I-9 Form (if hired after 11/6/86)	
7. W-4 Form	
8. Criminal Record Summary	
9. VPIN entered	

NOTES: _____

