

## NEW EMPLOYEE FORMS ORIENTATION

Place a check mark in front of each form that has already been completed in the departmental office:

- \_\_\_\_\_ Direct Deposit Form (DA-184)
- \_\_\_\_\_ Employee Data Sheet (EDS)
- \_\_\_\_\_ Employee Eligibility Verification Form (I-9)
- \_\_\_\_\_ Employee's Withholding Allowance Certificate (W-4)
- \_\_\_\_\_ Group Health Insurance Enrollment Form (29-136)  
*(within 31 days of appointment date)*
- \_\_\_\_\_ KanElect Flexible Spending Account Enrollment Form (DA-66)  
*(within 31 days of appointment date)*
- \_\_\_\_\_ KPERS Designation of Beneficiary (KPERS 7/99)  
*(immediately upon appointment)*
- \_\_\_\_\_ KPERS Optional Group Life Insurance Enrollment Form (GB 1916)  
*(within 30 days of appointment date)*
- \_\_\_\_\_ Substance Abuse Policy Affirmative Form (DPS 417)

**PLEASE BRING THIS CHECKLIST WITH YOU TO NEW EMPLOYEE ORIENTATION**

Name \_\_\_\_\_

Department \_\_\_\_\_