



Position _____

Select School Site(s)

- DECS
- LCS 1500 Park LCS
- 1511 Delaware LCS
(All for District)

New Employee Packet

Welcome!

The documents necessary to begin your employment with River Charter Schools listed below. Please complete the documents and return all completed forms to your school site office to the attention of the CBO. This information is necessary for the River Charter Schools payroll system and/or to comply with various laws.

1. _____ W-4
2. _____ DE-4
3. _____ I-9
4. _____ Direct Deposit Authorization
5. _____ Emergency Information Form
6. _____ Retirement System Status Form
7. _____ Social Security non-coverage acknowledgement (certificated staff only)
8. _____ CalSTRS Election form (substitute teachers only - if you are not already in CalSTRS)
9. _____ POP Election form (so that medical plan contributions you make if any may be pre-tax)

Tax Sheltered CalSTRS PENSION2 457(b) Plan (optional) (all employees are eligible):

If you choose to participate in the supplemental CalSTRS PENSION2 457(b) you must submit a completed Salary Deferral Agreement to authorize your contribution.

1. _____ CalSTRS PENSION2 457(b) Voluntary Salary Deferral Agreement; and,
2. _____ CalSTRS 457b Enrollment Book pages 33 – 36 which are to be completed and signed

When you turn in your completed documents, if you have not already done so, please also provide the following clearance documents:

1. _____ LiveScan receipt copy (obtained from Capital LiveScan 57th & Broadway, Sacramento)
2. _____ TB clearance
3. _____ Official Transcripts in sealed envelope (certificated staff only)
4. _____ Credential (certificated staff only)
5. _____ NCLB Certificate of Compliance with supporting documents (certificated staff only).

If you are eligible to participate in any of River Charter Schools employee benefits programs in accord with the terms of River Charter Schools Employee Handbook, please also complete the appropriate Healthcare and Retirement Benefits Packets.

Please indicate that you have downloaded or been given copies of the following required disclosures by initialing next to each of the following items and signing and dating below them:

1. _____ Worker's Comp Brochure with Personal Chiropractor or Acupuncturist Designation Form
2. _____ DE2515 Disability Insurance Pamphlet
3. _____ DE2511 Paid Family Leave Pamphlet
4. _____ Sexual Harassment Information Sheet
5. _____ Health Insurance Marketplace Options

I have been given or downloaded each of the above initialed disclosures.

Signed

Printed Name

Date

We look forward to working with you!

If you have any questions regarding the materials or how to complete them, please contact Elena Riolo, HR/Payroll Specialist , at (916) 936-0287 or RCSHR@rivercharterschools.org.