



# TOWN OF BERLIN

## New Hire Form

To be filled out by the employee and reviewed/completed by Department Head or Hiring Authority. Return this form to the Treasurer along with all mandatory and any voluntary forms required prior to employee being paid. Please print or write clearly. Note that all fields must be answered, in particular date of hire.

Name: \_\_\_\_\_  
First M Last

Legal Address: \_\_\_\_\_ Phone: ( ) \_\_\_\_ - \_\_\_\_\_

Email: \_\_\_\_\_

Cell: ( ) \_\_\_\_ - \_\_\_\_\_

City State Zip

Mailing Address (if different):

\_\_\_\_\_ Date of Hire (start date): \_\_\_\_/\_\_\_\_/20\_\_\_\_

\_\_\_\_\_ Full Time? \_\_\_\_ Part Time? \_\_\_\_

\_\_\_\_\_ Hours per week: \_\_\_\_\_

City State Zip

Position Hire for: \_\_\_\_\_ Department \_\_\_\_\_

Are you now, or have you ever been, a member of a public retirement system? \_\_\_\_\_

Do you work part time in any other municipality at this time? \_\_\_\_\_

Rate of Pay: \_\_\_\_\_ per Hour  
\_\_\_\_\_ per day (schools only)  
\_\_\_\_\_ per week (salary)

If part time, please fill in hours worked by day:

Mon	Tues	Wed	Thurs	Fri	Sat	Sun

All New Hires must complete the following forms by law: Federal W4, State M4, I-9 (immigration form), Ethics Form, Sexual Harassment form, Social Security Statement form, and either a MA Teacher Retirement, Worcester Regional Retirement or Obra Mandatory form. In addition, they must sign the Berlin Personnel Committee forms checklist sheet and submit a direct deposit form. Those employees who require a CORI check must submit this form with no exception. Optional forms include the Clinton Savings Bank form, Aflac Form, Colonial Life form, PenServ (annuity) Form and benefits information sheets. Benefit qualified employees need to contact the Treasurer for enrollment forms and benefit review. The Town of Berlin requires all pay to be done via direct deposit. All forms with the exception of the benefit enrollment forms are on the Town of Berlin Web Page under "Treasurer" then under New Hire forms.

The following mandatory forms have been completed and reviewed by the supervisor/hiring authority:

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> New Hire Form | <input type="checkbox"/> Ethics Form          | <input type="checkbox"/> Personnel Form                           |
| <input type="checkbox"/> I-9           | <input type="checkbox"/> Sexual Harassment    | <input type="checkbox"/> Direct Deposit form                      |
| <input type="checkbox"/> W4            | <input type="checkbox"/> CORI (if required)   | <input type="checkbox"/> Special forms given by police or schools |
| <input type="checkbox"/> M4            | <input type="checkbox"/> Social Security Form |   |

Correct Retirement Form (\*see Retirement Forms/Sign up below)

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> MTRS (Teachers) | <input type="checkbox"/> WRRS (20 hrs. or >) | <input type="checkbox"/> Obra Mandatory (< 20 hrs.) |
|--|--|---|

**\*Retirement Forms/Sign up:**

- School Personnel who qualify for Massachusetts Teacher Retirement System (MTRS) must enroll online and coordinate sign up with the payroll department at Central Office.
- All School Personnel who do not qualify for MTRS working 20 hours or more must join the Worcester Regional Retirement System (WRRS).
- All School Personnel who work less than 20 hrs. per week must join the OBRA Mandatory plan.
- All employees working 20 hours or more per week (permanent) must join the Worcester Regional Retirement System by completing a form. (Inspectors paid a fee do not qualify). A copy of a birth certificate and the Social Security Form are required to join WRRS. Military personnel may need to also provide copies per pleasure of WRRS.
- All employees working less than 20 hours, with the exception of those retirees who return in the same position, must join the Obra Mandatory plan. (There is no exception on age limit, both young and old!)

**All employees who work 20 hours or more on a permanent basis qualify for Employee Benefits. Enrollment forms are available from the Treasurer.**

The employee is interested in discussing the following benefits with the Treasurer. The employee is informed they have 30 days from the date of hire to enroll or will have to wait for a qualifying event or the next open enrollment period:

- |  |  |  |  |                                |
|--|--|--|--|--------------------------------|
| <input type="checkbox"/> Medical       | <input type="checkbox"/> Dental          | <input type="checkbox"/> Disability    | <input type="checkbox"/> Life            | <input type="checkbox"/> Aflac |
| <input type="checkbox"/> Colonial Penn | <input type="checkbox"/> PenServ Annuity | <input type="checkbox"/> G. W. Annuity | <input type="checkbox"/> Clinton Savings |                                |

By signing below, the hiring authority certifies that they have: (1)reviewed the employee handbook with the new hire, (2)witnessed (and signed off that) the employee sign the sexual harassment and I-9 forms, and (3)checked all the other forms for accuracy. The supervisor/hiring authority will receive an employee number upon submission of these forms.

Appointing Authority Signature(s):

_____	_____
_____	_____
_____	_____
_____	_____