

Personnel/Volunteer File Checklist

Name: _____ Date: _____

Section I

- ___ Completed, signed Application for Employment form
- ___ Preemployment Interview(s)
- ___ Individual job qualifications (i.e., resume with experience and education)
- ___ Documentation of employment Reference Checks (at least two)
- ___ Texas Employer New Hire Reporting Form
- ___ Documentation of offer of Exit Interview

Section II

- ___ Signed Job Description for each position held
- ___ Competency Skills Competency Checklist (on hire and prior to performing duties independently; annually thereafter).
- ___ Written exam (HA, others as per policy)
- ___ Signed Orientation Checklist
- ___ Employee Acknowledgment
- ___ Statement of Employability to include results of Employee Misconduct Registry (EMR) and Nurse Aide Registry (NAR) for all unlicensed direct care staff (including Chaplain) as well as documentation that Criminal History Check (unlicensed staff, Owner, Adm/Alt Admin, CFO) was completed on-line; OIG check as required.
- ___ W-4 tax withholding form (download most current version at www.irs.gov/pub/irs-pdf/fw4.pdf)
- ___ Confidentiality/Conflict of Interest Statement
- ___ Miscellaneous

Section III

- ___ Documentation/copy of current License, Registration/Certification, or Competency (ST-CCC& license, MSW - Masters Degree & license)
- ___ Verification of current License/Certification by verbal contact with licensing board or through written verification (as required by State regulation)
- ___ Verification of education/training/diplomas/statement of formal training for nonprofessionals
- ___ Current CPR, (if required)
- ___ Current Drivers License
- ___ Current Automobile Liability
- ___ Compliance Pledge if agency has Compliance Program

Section IV

- ___ Inservice Records
- ___ Performance evaluations (90 day evaluation following hire of aides, then at least annually for aides and all other staff), onsite supervisory visit, counseling forms, commendations

Health File/ I-9 Checklist

Name: _____ Date: _____

All health files may be maintained in a sealed envelope in the personnel file or in a separate file/binder in a secure location.

___ TB clearance (if required, according to agency policy)

___ Hepatitis B consent/declination

___ Hepatitis B vaccination tracking form

Other forms if applicable

___ HBV/HIV exposure and exposure follow up

___ Workers compensation forms and related documents

___ Medical Leave of Absence forms and related documents

___ Medical information related to accommodation

___ Miscellaneous documentation of illness

I-9 Form should not be in the personnel file, but kept in a separate file folder/binder in a secure location. Download most current version at www.uscis.gov/files/form/i-9.pdf

Criminal Background History Check Form and health information should not be filed as part of the personnel file, but should be kept in a separate file folders/binders in a secure location.