



Human Resources-Benefits

New Hire Benefits Checklist

Review, sign, and return the following to the YCCD Benefits Office:

	<p><b>SISC Enrollment Form OR Kaiser Enrollment Form</b>  <u>If you are adding a spouse/partner, you will also need to submit the following three items:</u></p> <ol style="list-style-type: none"> <li>1. Photocopy of your marriage certificate/legal domestic partnership</li> <li>2. The first page of this/last year's taxes which shows the same address for you and your spouse/partner</li> <li>3. Copy of your spouse/partner's social security card</li> </ol> <p><u>If you are adding a dependent child, you will also need to submit for each dependent:</u></p> <ol style="list-style-type: none"> <li>1. A copy of their birth certificate</li> <li>2. A copy of their social security card</li> </ol> <p>If enrolling a legally dependent adult child, contact Benefits for proper documentation to be included.</p>
	<p><b>Active Plan Election Form</b> -Initial under your selected health and dental plan then sign.</p>
	<p><b>Health Plan Premium Payment Authorization Form (POP Form)</b> – This form is kept on file for all employees should you ever elect a medical plan that has a cost of premium (BS PP 80%, BS PP0 90%, or BS PPO 100%).</p>
	<p><b>CIGNA Beneficiary Designation Form--Basic Life Insurance coverage of \$50,000</b> Basic Life Insurance is provided to you at no cost while you are an employee at YCCD. This form requires an original/wet signature to be on file.</p>
	<p><b>*Optional- Voluntary Term Life Insurance Coverage/Life Insurance-Evidence of Insurability Form</b> – This is an opportunity to purchase Life Insurance Coverage, cost is determined by your age and amount of coverage you choose.</p>
	<p><b>Virtual Meeting with American Fidelity-</b> YCCD has partnered with American Fidelity to assist you in making your benefits selections. They will also review optional enrollment in a Healthcare Flexible Spending Account.</p>

I have received, understand and completed all of the above documents. I understand that all documents are due in the HR/Benefits Office no later than the first day of start of work. Failure to complete fully and sign all required documents may result in delay of being enrolled in benefits and receipt of medical ID cards.

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_