



Yosemite Community College District
Human Resources

TEMPORARY FULL-TIME FACULTY – New Hire Documents

Please use 1st day of start of work when signing all documents. Sign & return the following:

- OFFICIAL College Transcripts. It is the employee’s responsibility to submit Official Transcripts for all conferred degrees and/or academic units evaluated toward salary placement. Please send Official Transcripts to YCCD, Attention HR, PO Box 4065, Modesto CA 95352. For Foreign Degree Evaluation, please refer to https://www.yosemite.edu/hr/foreigndegreeevaluation.
Verification of Experience. It is the employee’s responsibility to submit Academic and Vocational Work Experience forms to previous employers for verification. Required at start of work for initial placement.
Fingerprint & Criminal History Background Check. At employee expense. Additional information enclosed. Required within a maximum of 10 working days from the date of employment
TB Clearance. No academic employee shall commence service until certificate has been provided. Free testing: MJC Health Services on East or West Campus 209-575-6037. Columbia – contact campus nurse at 209-588-5204. At your own expense, you may use your primary care provider. If you have tested positive in the past, please notify the Campus Nurse prior to testing.
I-9 Form – Employment Eligibility Verification. Verifies you are legally eligible to work in the U.S. Complete Section 1. Date with first day of work. See “List of Acceptable Documents” and provide identification from that list.
W-4 Form. Use your legal name (as listed on your Social Security card) and mailing address.
EDD Employee’s Withholding Allowance Certificate. Use for state income tax withholding.
Retirement System Election. You are eligible to elect membership into CalSTRS Defined Benefit Program. For more information, contact Payroll at (209) 575-6538.
Statement Concerning your Employment in a Job Not Covered by Social Security
Oath of Affirmation
Policy Acknowledgement
Recipient Designation Form. In the event of death, this form designates your monetary recipient.
Confidential Data Sheet
Safety Training (web-based). Complete & return. For questions, please contact Risk Management at (209) 575-6963
Emergency Contact Information
YFA New Member Form
Payroll Direct Deposit. (Optional) Use for direct deposit, and attach a voided check.
Parking Permit Information

Are you a Retiree from CalSTRS or CalPERS? [] Yes [] No

For Information Only:

Welcome to CalSTRS
Certificated Adjunct/Overload
Hourly Salary Schedule

On-the-Job Injury Reporting Procedure
Tax Sheltered Annuities
Schedule of Holidays

YFA Faculty Contract
Affordable Care Act Notice

I have received, understand, and completed all the above documents. I understand that all documents are due in Human Resources no later than the 1st day of start of work and failure to complete fully and sign all required documents may result in delay in salary placement, delay in pay and/or delay in start of work.

Employee Signature: _____ Date: _____

**Please refer to the Benefits Office website for the New Employment Benefits Information.