

PRE-HIRE TRACKING LIST

Part A – Panel Lead

Applicant Name:	Dept. Contact Name:
Department:	Supervisor Name:
Position:	Interview Date:
Type of Position: <input type="checkbox"/> Full Time <input type="checkbox"/> PSE <input type="checkbox"/> Intern <input type="checkbox"/> Volunteer <input type="checkbox"/> Other	
Requested Pre-Employment Test: <input type="checkbox"/> Physical <input type="checkbox"/> Drug Screen <input type="checkbox"/> Fingerprints <input type="checkbox"/> Background	

Reference Checks

Company	Name	Date	Reference OK
1.		__/__/__	__Y__N
2.		__/__/__	__Y__N
3.		__/__/__	__Y__N

Comments: _____

Verification of Professional Licensure: Y N N/A

HHSA Staff Only: LEIE Search: Y N N/A

HHSA Staff Only: Medi-Cal Suspended and Ineligible Provider List: Y N N/A

Part B – Director or Designee

Director/Designee approval for hiring: Yes No

Signature: _____ Date: __/__/__/

Email completed form to the Personnel Department

Part C – Personnel Department

Range <u> </u> Step <u> </u> Wage <u> </u>	Date of Conditional Job Offer: __/__/__	Accepted: <input type="checkbox"/> Y <input type="checkbox"/> N
Date of Birth: __/__/__	Phone Number: _____	Application on File: _____
<u>Medical/Drug</u>	<u>Live Scan</u>	<u>Law Enf. Background</u>
Appt. <u> </u> / <u> </u> / <u> </u>	<u> </u> / <u> </u> / <u> </u>	<u> </u> / <u> </u> / <u> </u>
Location _____	_____	_____
Log <u> </u> / <u> </u> / <u> </u>	<u> </u> / <u> </u> / <u> </u>	<u> </u> / <u> </u> / <u> </u>
Results Rec'd <u> </u> / <u> </u> / <u> </u>	<u> </u> / <u> </u> / <u> </u>	<u> </u> / <u> </u> / <u> </u>
Cleared <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
If no, please explain: _____		
Date Notified Dept of Results: __/__/__		

Employment Start Date: <u> </u> / <u> </u> / <u> </u>	Notified Personnel of Start Date: __/__/__
Comments: _____	

Email completed form back to the Personnel Department

Official Offer Letter Sent: <input type="checkbox"/>	Onboarding Email Sent: <input type="checkbox"/>	Pers. Dept. Form 700: <input type="checkbox"/>	IT Form: <input type="checkbox"/>	E-Verify: <input type="checkbox"/>
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See instructions on reverse side

Instructions:

The Personnel Department will Email this form to the Interview Panel Lead.

Part A: To be completed by the Panel Lead and forwarded to the Director or Designee for approval.

Part B: To be completed by the Director or Designee and returned to the Personnel Department.

Part C: To be completed by the Personnel Department and forwarded to the Supervisor.

Part D: To be completed by the Supervisor and returned to the Personnel Department.

Part E: To be completed by the Personnel Department and then file the completed form in the employee's personnel file.