

# EMPLOYEE MASTER FORM

NAME: \_\_\_\_\_

EMPLOYEE NO. \_\_\_\_\_

ADDRESS 1: \_\_\_\_\_

SEX: Circle one:        M        F

ADDRESS 2: \_\_\_\_\_

BIRTHDATE: \_\_\_\_\_

CITY: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_

STATE: \_\_\_\_\_

EMERGENCY PHONE: \_\_\_\_\_

ZIP CODE: \_\_\_\_\_

DATE HIRED: \_\_\_\_\_

SSN: \_\_\_\_\_

## EMPLOYEES ISSUED KEYS:

I understand that all keys are the property of the Glen Ellyn Park District. Those keys issued to me during my employment with the Glen Ellyn Park District must be returned before I receive my final pay. I further understand that there is a **\$50.00 key deposit required**, which will be deducted from my first two pays (\$25.00 ea.) and returned to me with my last pay. It will be my responsibility to return all keys to Jeanine Sesto, Executive Assistant, and she will notify the business office to release the accrued funds. If lost keys are found within 60 days after replacement fee is paid, a refund may be issued. Initial \_\_\_\_\_

### KEYS ISSUED

_____	_____
_____	_____
_____	_____

### WHERE APPLICABLE:

I have been issued the following Pager:        # \_\_\_\_\_

I have been issued the following Cellular Phone: # \_\_\_\_\_

These items must be returned upon termination of employment with the Glen Ellyn Park District. It will be my responsibility to reimburse the Park District for any expense incurred by the District for loss or damage to these items while in my possession. Initial: \_\_\_\_\_

EMPLOYEE'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

SUPERVISOR'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

For office use only: Deduction entered: \_\_\_\_\_ Deduction Refunded: \_\_\_\_\_