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|  | **Hire Form for** **Paper Agencies**  Revised: 03/24 |

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| --- | --- | --- | --- |
| **Employee Information** | | | |
| **Hire Date:** | **Gender:** Male  Female  Non-binary | | **Date of Birth:** |
| **Agency Name:** | | **Agency Personnel Area:** | |
| **Employee’s Name:** | | **Social Security Number:** | |
| **Highest level of education achieved:** | | **Institution:** | |
| **Type of degree/certification/diploma awarded:** | | **Institution Location/State:** | |
| **Major field of study (if a college degree is indicated):** | | | |

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| **Appointment/Position Information** | | | | | | | | | | |
| **Hire Reason/SCS Rule Number for Hire Action:** | | | | | | | | | | |
| **Position Number:** | | | **Job Title:** | | | | **Classified**  **Unclassified** | | | |
| **Job Posted By Civil Service: Yes  No** | | | | **Minimum Qualifications Met: Yes  No** | | | | | **LA Careers Requisition Number:** | |
| **Contract Type:** | | | | | **Assignment End Date (if applicable):** | | | | | |
| **Address:** | | | | | **City:** | | | | | **State:** |
| **Zip Code:** | | | | | **Parish:** | | | *Click here if employee wants address information kept confidential* | | |
| **Work Hours (FT or PT):** | | | | **Pay Reason:** | | | | **SCS Rule Number for Pay:** | | |
| **Pay Amount:** | **Hourly:** | | | **Bi-weekly:** | | | | **Annually:** | | |
| **Race/Nationality:** | | American Indian/Alaskan Native  African American or Black  Asian  Caucasian  Native Hawaiian or Other Pacific Island  Other | | | | | | | | |
| **FLSA Status:** Exempt  Non-Exempt | | | | | | **Adjusted Service Date:** | | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Agency Contact Information** | | | | |
| **Contact Name:** | **E-mail Address:** | | **Phone**: | |
| ***I hereby certify that all information on this document is true and correct to the best of my knowledge.*** | | | | |
| **Appointing Authority Signature:** | | **Title:** | | **Date:** |

|  |  |  |
| --- | --- | --- |
| ***STATE CIVIL SERVICE USE ONLY*** | | |
| **LaGov HCM Personnel Number:** |  |  |

**Electronic Submission:**

**Scan form as PDF & upload via** [**Paper Agency Portal**](https://apps01.civilservice.louisiana.gov/asp/HRPortal/LoginSimple.aspx?ReturnUrl=%2fasp%2fHRPortal%2fDefault.aspx) **in the HR Info Portal.**