Boards and Commissions

Checklist for **Temporary** Employee

Name:	Effective Date:
Board:	Department Number:
City User Fee: Y or N	

Require	s Ink Signature:
□ F	orm I-9 Employee Information
□ F	orm I-9; Employer Verification
	Copy of supporting documentation ID(s) for I-9
□ F	orm W-4; Federal Tax Withholding Form
□ F	orm WV/IT-104; State Tax Withholding Form
□ P	ayroll Direct Deposit Form OR Pay Card Request Form (attach voided check or bank
d	locumentation verifying account and bank routing numbers)
Retirem	nent Benefit (Optional)
□ v	VV Retirement Plus (Optional. Return form declining participation if not enrolling)
□ V	VV Retirement Plus Beneficiary (Complete if enrolling)

• Temporary employees transferring from another agency do not need to complete tax forms or direct deposit form unless making changes.