



**Cover Sheet for:  
New Hire Packet**

Prior to submitting the New Hire Packet, please ensure that the Background Check has cleared and that **ONLY** the following documents are attached:

- New Hire Form
- W4 for current tax year
- NC4 for current tax year
- Completed Direct Deposit Form with account number
- Copy of Voided Check
- Please indicate Payroll/Effective Date

Please save the New Hire Packet, including the Cover Sheet in the following naming convention:  
Location#\_Employee Last Name\_Effective/Payroll Date

When emailing the packet to [hr.payrollprocessing@raldioc.org](mailto:hr.payrollprocessing@raldioc.org), please use the following Subject Line: NH Packet\_Location#\_Employee Last Name\_Effective/Payroll Date

**\*\* If New Hire is Regular Full Time (RFT 26pays)-Regular Full Time (RFT 20pays), please complete the Christian Brothers (CBEBT) Request for Group Coverage/Enrollment Form which can be found here: <https://dioceseofraleigh.org/human-resources/cbebt-forms> and submit to [Benefits.forms@raldioc.org](mailto:Benefits.forms@raldioc.org) or via confidential fax 984-275-1726.**

Thank you!

Diocese of Raleigh  
Employee New Hire/Rehire Form

Type of Employee

Parish  
School  
Catholic Center

RL# \_\_\_\_\_

Hrly/Sal Exmpt \_\_\_\_\_

Enter in all information for the new employee.

**Refer to the HR Payroll Calendar for paperwork due dates.**

Submit completed forms and questions to [hr.payrollprocessing@raldioc.org](mailto:hr.payrollprocessing@raldioc.org) (preferred) or fax to 1-984-275-1732.

Company/Location Information

Date of Submittal

Select location from drop down menu

Name of Person Submitting Form

Company/Location: Choose an item.

Signature

Employee Information

Social Security Number

First Name

Middle Initial

Last Name

Preferred Name

Personal Information

Address

City

State

Zip

Phone

Personal Email

Alternate Email (Work)

Birth Date

Gender

Male

Female

I-9 Verification (Verified?)

Yes

Pending

**REMEMBER to complete the form I-9 and E-verify within first three days of employee working for pay. Employee must be E-verified within first 3 days of work, not prior to starting work. If you have questions, contact HR.**

Background Check Clearance Date

**REQUIRED. Do not submit new hire form if blank.**

Key Dates

First day worked:

For school employees, specify type of employee, and contract dates:

Principal

Elementary/Secondary Teacher

Preschool Teacher

Contract Start Date:

Contract End Date:

Job/Payroll

**Job Information**

Supervisor Name

**Job Group**

**Multi-Rate Rate Job (may hold a secondary job\*)**

Department Number

Job title

Alternate Job Title

**\*If employee has a secondary position, note the secondary job title here:**

Diocese of Raleigh  
Employee New Hire Form

Payroll Information

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**Pay Rate**                                      Per Hour (*hourly*)                                      Per Period (*salaried*)

**Scheduled Hours**

Hours Worked per Week:	
Biweekly Hours Calculation:	

**Earnings Group Code**

Exempt (Salary)                      Non-Exempt (Hourly)

**Deduction Benefit Group**

- No Benefits (Temp Employees) includes substitutes
- PT - Part Time Less than 20 hrs. (<20 hrs.)
- RGPT - Regular Part-time (20-29 hrs.)
- RGFT - Reg Full-time Benefit 26 (30+ hrs.) (12-Month Employee)\***
- RGFT2 - Reg Full-time Benefit 20 (TA 10-Month Employee)\***
- \*(if selected, please refer to Cover Sheet for instructions.)**

**Employee Type**

- RGF - Reg Full-Time 30 (30+ hours/week)                      TEMP – Temporary (project based/substitutes)
- RGP - Reg Part-Time 20 (20-29 hours/week)                      SEM - Seminarian
- PT - Part-Time Less than 20 hrs. (<20 hrs/week)                      PRS - Priest

**Status**

Full-Time                                      Part-Time

Time Off and Allowances

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**Security Role** (*all employees are assigned employee, if manager role to be added, please select both*)

Employee                                      Manager                                      Business Manager

**Policy Group** (*For Regular Full Time and Regular Part Time employees who work a minimum of 20 scheduled hours per week. Refer to the Time Off Policy*) This is assigned by HR using the following information.  
Complete all fields according to the employee's schedule:

Hours per week:                                      Days per week:                                      Hours per day:

Time (Timesheets)

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**Security Roles**

(*all employees are assigned employee. If manager/business manager role to be assigned please select employee and one manager role*)

Employee                                      Manager                                      Business Manager

**Timesheet Configuration** (*timesheet set up*)

This is assigned in keeping with FLSA status (Exempt or Non-exempt) and Location. Select one of the following:

*Parish/school employees are assigned either Exempt/Hourly with Job TX:*

Exempt with Job TX                      Hourly with Job TX

**ONLY** Piggyback locations, Catholic Center and Catholic Charities employees are assigned Exempt/Hrly. with Dept TX:

Exempt with Dept TX                       Hourly with Dept TX