



NEW HIRE FORMS CHECKLIST DEPARTMENT OF FISH AND WILDLIFE



New to State Service (includes Retired Annuitants)	Due Date
<input type="checkbox"/> Authorization to Use Privately Owned Vehicles on State Business (STD 261)	If applicable
<input type="checkbox"/> Annual-Vacation Sick Leave Election Form	Within 2 days of start date
<input type="checkbox"/> ID Badge DFW 212	On Start Date
<input type="checkbox"/> Beneficiary Designation (PERS-BSD-241)	Within 2 days of start date
<input type="checkbox"/> Direct Deposit Enrollment Authorization (STD 699)	Anytime
<input type="checkbox"/> Employee Action Request (STD 686)	Within 2 days of start date
<input type="checkbox"/> Employment Eligibility Verification (I-9)	Prior to Start Date
<input type="checkbox"/> Military Service Declaration (STD 912)	Within 2 days of start date
<input type="checkbox"/> Oath of Allegiance (STD 689)	Within 2 days of start date
<input type="checkbox"/> Oath of Office (STD 688)	Exempt Employees Only
<input type="checkbox"/> Designation of Person Authorized to Receive Warrants (STD 243)	Within 2 days of start date
<input type="checkbox"/> State Employee Race/Ethnicity Questionnaire (CalHR 1070)	Within 2 days of start date
<input type="checkbox"/> Statement of Economic Interest (Form 700) – if applicable	Within two weeks of start date
<input type="checkbox"/> Workers’ Compensation Pre-Designation (FG HRB 544)	At time of hire or any time after
<input type="checkbox"/> CalPERS Justification of Spouse Form PERS-BSD-800	Within 2 days of start date
<input type="checkbox"/> CalPERS Reciprocal Self-Certification Form PERS-CASD-801	Within 2 days of start date
<input type="checkbox"/> Duty Statement	Review and sign on first day
<input type="checkbox"/> Employee’s Designated Headquarters DFW 202	Within 2 days of start date
<input type="checkbox"/> Home Address – Request for Non-Disclosure	If applicable
<input type="checkbox"/> DFW 1024 Anti-Nepotism Form	During Interview Process
<input type="checkbox"/> Employee Asbestos Notification STD-250	Within 2 days of start date
<input type="checkbox"/> Notice to Employees – Injuries Caused by Work (DWC 7)	On start date
Transfer from Another State Agency	Due Date
<input type="checkbox"/> Duty Statement	Review and sign on first day
<input type="checkbox"/> Statement of Economic Interest (Form 700) – if applicable	Within two weeks of start date
<input type="checkbox"/> Workers’ Compensation Pre-Designation (FG HRB 544)	At time of hire or any time after
<input type="checkbox"/> ID Badge DFW 212	On Start Date
<input type="checkbox"/> DFW 1024 Anti-Nepotism Form	During Interview Process
<input type="checkbox"/> Employee Asbestos Notification STD-250	Within 2 days of start date
<input type="checkbox"/> Notice to Employees – Injuries Caused by Work (DWC 7)	On start date