

## **Crow Wing Soil and Water Conservation District**

322 Laurel St. Suite 22 • Brainerd, MN 56401 www.cwswcd.org

This checklist is	s designed to assist designated personnel	in providing a thore	ough or	rientation for new employees.
Employee Na	me:			
Employee Sig	nature:			
Supervisor Sig	gnature:			
Administrative	e Signature:			
Completed	ADMINISTRATIVE	Complete	d	SUPERVISOR
Date				
	Wages/Salary (pay periods)	Date		
	Time Sheet: Codes		What	is expected of employees
	Personnel Rules & Regulations		Proba	ationary Period
	I-9 Form		Perfo	rmance Reviews
	W-4 Form		Job D	Outies and Responsibilities
	MN New Hire Form		Perfo	rmance Expectations
	PERA Enrollment		Traini	ing
	Life Insurance MN NCPERS		Confli	ict of Interest
	MN DCP Retirement		Work	Hours
	"Tennessen Warning"		Perso	onal calls and visitor
	Incident report form -	<del></del>	Trave	el policies/expenses
	What to do in case of an accident		SWC	D Policies
	Computer set up/Log In			
	Dress Code			
	Reporting absence			
	Keys			
	Overtime/Comp Time			
	Breaks and Lunches, time/locations			
	Purchases/Charges/Petty Cash			

Employee Detail Notice Form



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