



# POST FALLS SCHOOL DISTRICT #273

DISTRICT ADMINISTRATIVE OFFICE

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www.pfsd.com

## Substitute Checklist

Non-Benefit Classified Substitute

### Substitute Documents to Complete

- ☐ I-9 Employment Eligibility
- ☐ Federal W-4 Form
- ☐ Idaho State W-4 Form
- ☐ Payroll Direct Deposit Form
- ☐ Accident Reporting
- ☐ Substitute Information and Emergency Contact Form

### Additional Substitute Information Includes

- ☐ Substitute Handbook
- ☐ Background Check Memorandum

Are you a current or retired PERSI participant? Yes \_\_\_\_\_ No \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Your signature acknowledges that you have been presented with the above items.

#### **Employee's Ethnic & Racial Identity – Optional**

Mark one ethnic identity:

- ☐ Hispanic or Latino
- ☐ Non-Hispanic or Non-Latino

Mark one or more racial identities:

- ☐ (1) American Indian or Alaska Native
- ☐ (2) Asian
- ☐ (3) Black or African American
- ☐ (4) Native Hawaiian or Other Pacific Islander
- ☐ (5) White

Observer Identified \_\_\_\_\_