

# MISSOURI DEPARTMENT OF TRANSPORTATION

## WORKFORCE PILOT PROGRAM EMPLOYEE NOTIFICATION

DATE		UNION	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
EMPLOYEE NAME		STATUS	<input type="checkbox"/> Trainee	<input type="checkbox"/> Journeyperson	
HOME ADDRESS					
CITY/STATE/ZIP					
HOME PHONE		DATE OF BIRTH			
SOCIAL SECURITY NUMBER (LAST FOUR)		GENDER	<input type="checkbox"/> Male	<input type="checkbox"/> Female	
DATE HIRED BY COMPANY		VETERAN	<input type="checkbox"/> Male	<input type="checkbox"/> Female	
DATE STARTED ON PROJECT		PROJECT NUMBER			
CRAFT					
PREVIOUS CONSTRUCTION EXPERIENCE?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	IF YES, CRAFT LENGTH OF TIME		
CONTRACTOR			<input type="checkbox"/> Prime	<input type="checkbox"/> Sub	
ETHNIC BACKGROUND					
<input type="checkbox"/> NATIVE AMERICAN	<input type="checkbox"/> AFRICAN AMERICAN	<input type="checkbox"/> HISPANIC			
<input type="checkbox"/> ASIAN AMERICAN	<input type="checkbox"/> CAUCASIAN	<input type="checkbox"/> OTHER DISADVANTAGED			
NAME OF EMPLOYEE'S DIRECT SUPERVISOR					
JOURNEY RATE		FRINGE		ACTUAL RATE	
CONTRACTOR ELECTRONIC SIGNATURE					
			<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	
_____, CIVIL RIGHTS SPECIALIST					
DISTRIBUTION: SUBMIT BY EMAIL AND CC YOUR PROJECT OFFICE CONTACT. ATTACH NEW EMPLOYEE DOCUMENTATION. NEW EMPLOYEES MUST HAVE BEEN HIRED WITHIN THE LAST 90 DAYS. ALL NEW HIRE NOTIFICATIONS MUST BE APPROVED BY ECR.					