



**New Contract Employee Checklist** – Please print all forms *single sided* and mail originals *(wet ink)* along with the checklist to: MPTC Headquarters, 42 Thomas Patten Drive, Randolph, MA 02368 Attn: Fiscal Department.

EMPL	OYEE INFO	RMATION	
Full N	ame:		
Address:			
Home Phone:			
Cell Phone:			
Email	Address:		
CHEC	KLIST		
	FY22-FY24 MPTC Standard Contract Form		Complete, Sign and Return
	Instructor Contract Addendum September 1, 2021		Read only
	Commonwealth of MA Terms and Conditions		For Your Review – Do Not Return
	I-9 Employment Eligibility Verification Form		Complete, Sign and Return with copies of valid forms of ID: (1) from List A or (2) from List B and C – see page 3 for instructions
	MPTC Code of Conduct		Complete, Sign page six only, Return
	W-4 Federal Tax Withholding Form		Complete, Sign and Return
	M-4 State Tax Withholding Form		Complete, Sign and Return
	Direct Deposit Form (Mandatory)		Complete, Sign and Return
	Commonwealth of MA HR Contract Employee Disclosure Form		Complete, Sign and Return
	Massachusetts Deferred Compensation SMART Plan– Mandatory OBRA		Complete, Sign and Return all three pages
	Social Security Administration 1945 Form		Complete, Sign and Return
	Mass HR Employee Self Service Instructions		For Your Review – Do Not Return
	Certification(s): for office use only		Expiration Date:
1.			
2.			
3.			
4.			