



Onboarding Employee Checklist

The checklist is for the manager of the intern to help collect HR and academic paperwork along with preparing for the intern to join your company.

Onboarding

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|---------------------------------------------------------------------------------------------------------------|-----------------------------|
| <input type="checkbox"/> Set Up Gmail Account, Google voice phone number, Signature for email | Supervisor: ____ Date: ____ |
| <input type="checkbox"/> Set up Slack, Asana, Google Drive | Supervisor: ____ Date: ____ |
| <input type="checkbox"/> Discuss pay dates | Supervisor: ____ Date: ____ |
| <input type="checkbox"/> Set up computer, phone, log in password, office supplies, email | Supervisor: ____ Date: ____ |
| <input type="checkbox"/> Non-Disclosure & Non-Circumvent | Supervisor: ____ Date: ____ |
| <input type="checkbox"/> Company directory | Supervisor: ____ Date: ____ |
| <input type="checkbox"/> Receipt of orientation package | Supervisor: ____ Date: ____ |
| <input type="checkbox"/> Work for Hire | Supervisor: ____ Date: ____ |
| <input type="checkbox"/> Orientation Manual for employee | Supervisor: ____ Date: ____ |
| <input type="checkbox"/> Reading List | Supervisor: ____ Date: ____ |
| <input type="checkbox"/> Business Cards/ Name plate | Supervisor: ____ Date: ____ |
| <input type="checkbox"/> Send an announcement via email to company welcoming new employee with their position | Supervisor: ____ Date: ____ |
| <input type="checkbox"/> Employer Data Form | Supervisor: ____ Date: ____ |

Intern Performance Plan

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|------------------------------------------------------|-----------------------------|
| <input type="checkbox"/> Performance Plan/Goal Sheet | Supervisor: ____ Date: ____ |
| <input type="checkbox"/> Copy of Intern's Resume | Supervisor: ____ Date: ____ |
| <input type="checkbox"/> Timesheet | Supervisor: ____ Date: ____ |
| <input type="checkbox"/> Exit Interview (360) | Supervisor: ____ Date: ____ |

Government Forms

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|-------------------------------------------------------|-----------------------------|
| <input type="checkbox"/> W-9 | Supervisor: ____ Date: ____ |
| <input type="checkbox"/> I-9 | Supervisor: ____ Date: ____ |
| <input type="checkbox"/> W2 | Supervisor: ____ Date: ____ |
| <input type="checkbox"/> W4 | Supervisor: ____ Date: ____ |
| <input type="checkbox"/> Copy of Driver's License | Supervisor: ____ Date: ____ |
| <input type="checkbox"/> Copy of Social Security Card | Supervisor: ____ Date: ____ |

Employer's Name: _____
(Print)

Employee's Name: _____
(Print)

Employer's Signature: _____

Employee's Signature: _____