

MELROSE PUBLIC SCHOOLS
360 Lynn Fells Parkway
Melrose, MA 02176

EMPLOYEE INFORMATION SHEET

Name: Last _____ First _____ Middle _____

Address: _____ Telephone #: _____

_____ Cell Phone #: _____

Date of Birth: _____ M/F _____ SS# _____

PAYROLL INFORMATION

Employee # _____ Date of Employment: _____

Marital Status: _____ Name of Spouse: _____

of Federal Exemptions: _____ # of State Exemptions: _____

MA Teachers' Retirement: _____%

Massachusetts Teacher's Certification # _____

CENTRAL OFFICE INFORMATION

Entered into MUNIS: _____ Degree/Step: _____

MUNIS Personnel Status Code: _____ Full Time w/ Benefits
_____ Part Time w/Benefits
_____ Full Time No Benefits
_____ Part Time No Benefits
_____ Temporary with No Benefits (six months or less)

Entered into ADMIN: _____ Unique ID# _____

MEPID#: _____ Received EPIMS Form: _____

MASSACHUSETTS TEACHERS' RETIREMENT

MTRS Pre-Enrollment: _____ Received Enrollment Form: _____

Entered into MUNIS: _____