

**Town of Lincoln
EMPLOYEE CHECKLIST**

I have received and submitted the following required forms:

(PLEASE PRINT PACKET SINGLE SIDED AND HAND SIGN PAGES BEFORE SENDING IN)

- ◇ **Benefit Decision Form**
- ◇ **Employee Information Sheet**
- ◇ **W-4 Federal tax form**
 - Please Read Instructions Before Filing Out Form**
- ◇ **M- 4 State tax form**
- ◇ **I-9 Form**
- ◇ **Middlesex County Retirement Form**
- ◇ **Conflict of Interest Memo and Acknowledgment Form**
- ◇ **Employee Acknowledgement of Town Policies:**
 - Drugs & Alcohol Policy**
 - Harassment Policy Affirmative**
 - Action & EEO Policy Social**
 - Networking Policy**
- ◇ **Direct Deposit Form**

I have been informed of the Town Employee Handbook and it has been made available to me.

Employees Signature: _____

Date: _____