



## In-Processing Form (IPF)

Hiring Manager must submit this form to Human Resources **within four business hours** of offer acceptance.

Date: __/__/____	Hiring Manager Name:
Offer Acceptance Date: __/__/____	Start Date: __/__/____

### Employee Information:

Name		Designated HQ (City)	
Division		Office/Cubicle #	
Section		Supervisor Name	
Title		Supervisor Phone #	
Address		Scheduled Orientation Date: __/__/____	

### Building Access: *(Other than employee's office)*

Building Name/Location	Floor/Area

### Phone Request:

*Select only the options needed:*

<input type="checkbox"/> New Phone Number		<input type="checkbox"/> Rebuild Voice Mail
<input type="checkbox"/> Use Existing Phone Number (____)____-____	→	<input type="checkbox"/> Keep Voice Mail → <input type="checkbox"/> Change Voice Mail Password

### Special Key Request:

Employee will be provided a key to his/her office door as well as to the cabinets in their office. List any special access key required.

### Other Special Requests:

### Technology Requests:

**Note:** For Technology Requests, the Information Technology Division (IT) will send the Hiring Manager a questionnaire to capture specific employee technology needs. Prompt response to the questionnaire will assist IT in providing technology prior to employee's first day at work.



## In-Processing Form (IPF)

# Instructions

**Form Description:** The IPF is used by Hiring Managers to provide standard or key hiring information to get the new employee setup for work. The Human Resources Manager forwards the information to the service divisions to prepare for the new employee's arrival. All fields must be filled out. In the event a field is not applicable, please add N/A to the answer.

**Date:** Date the form is initially filled out.

**Offer Acceptance Date:** Date the new employee accepted the job offer.

**Hiring Manager Name:** Hiring Manager's full name.

**Start Date:** Projected start date for new employee. This is the first date the employee is expected to start on payroll.

**Employee Information: - Name:** New employee's full name.

**Employee Information: - Division:** The agency division the new employee is reporting to.

**Employee Information: - Section:** The divisional section the new employee is reporting to.

**Employee Information: - Title:** Employee's official title

**Employee Information: - Address:** New Employee's physical office address. HQ address of 205 W 14th St, Austin, TX 78701 may be shorthand as "Austin – HQ."

**Employee Information: - Designated HQ (City):** New employee's designated HQ. This will be used to determine travel and other statuses.

**Employee Information: - Supervisor Name:** New employee's immediate supervisor's name.

**Employee Information: - Supervisor Phone #:** New employee's immediate supervisor's phone number.

**Employee Information: - Scheduled Orientation Date:** Date the new employee is scheduled to attend New Hire Orientation. This field is completed by HR.

**Building Access: - Building Name/Location:** The new employee will be granted access to her/his HQ office. If additional access for other areas, floors, buildings, etc. is required, list the building name and the location of the building.

**Building Access: - Floor/Area:** The new employee will be granted access to her/his HQ office and the capitol tunnel (permanent employees only). If additional access for other areas, floors, buildings, etc. is required, list the floor and or area in the above listed building or location.

**Phone Request: - New Phone Number:** Check this box if a new phone number is requested for the new employee. Either check this box or the Use Existing Phone Number box.

**Phone Request: - Use Existing Phone Number:** Check this box if an existing number is to be re-assigned to the new employee. If this box is checked a Voicemail box must be checked.

**Phone Request: - Rebuild Voice Mail:** Check this box if the Voicemail attached to the existing phone number assigned to the new employee should be erased and rebuilt.

**Phone Request: - Keep Voice Mail:** Check this box if the Voicemail attached to the existing phone number assigned to the new employee should NOT be erased and rebuilt. If this box is checked, the password box must be answered.

**Phone Request: - Change Voice Mail Password:** Check this box if the Voicemail box password should be reset. A new password will be provided to the new employee.

**Special Key Request:** The new employee will be provided a key to her/his office door as well as to the cabinets in her/his office. List any additional special access key required. Include building name, floor, room number, and description of door or cabinet.

**Other Special Requests:** Detail any other special requests. Include as much detail as possible.