



## New Hire Form for Prevention Staff

**This form is required in order for LRE to provide a username and password for the staff for the Prevention Data System or for any activities to be entered for the staff person.**

(Revised Dec 2021)

<b>Agency Name and Address</b>			
<b>Date of Request</b>			
<b>Staff Name</b>		<b>Email:</b>	
<b>Date of Hire</b>			
<b>Position/Title</b>			
<p><b>Does this staff replace another staff person who has left the agency?</b>    <input type="checkbox"/> <b>Yes</b>                      <input type="checkbox"/> <b>No</b></p> <p><b>If yes, please provide the name of the former employee:</b></p>			
<p><b>Please identify the relationship the staff has with your agency:</b></p> <p><input type="checkbox"/> Hired by agency – Part time?      Hours per week:</p> <p><input type="checkbox"/> Hired by agency – Full time</p> <p><input type="checkbox"/> Contractual</p> <p><input type="checkbox"/> Volunteer – receiving a stipend.</p> <p><input type="checkbox"/> Intern - Paid</p> <p><input type="checkbox"/> Intern – Unpaid</p> <p><i><b>Note:</b> Volunteer that are <u>not</u> receiving a stipend are not added to PDS because their services are not eligible for entry.</i></p>			
<p><b>Will this staffing addition change the total number of full-time equivalents (FTE) for this organization’s prevention budget?</b>                      <input type="checkbox"/> <b>Yes</b>                      <input type="checkbox"/> <b>No</b></p> <p><i><b>Note:</b> If yes, a revised budget must be submitted reflecting the FTEs.</i></p>			
<p>Has this staff achieved prevention certification?                      <input type="checkbox"/> <b>Yes</b>                      <input type="checkbox"/> <b>No</b></p> <p><i><b>Note:</b> Certification is not required for ‘specifically focused prevention staff’.</i></p>			
<p><b>If the staff has not achieved prevention certification, have they submitted a ‘Development Plan’ to MCBAP?</b>                      <input type="checkbox"/> <b>Yes</b>                      <input type="checkbox"/> <b>No</b></p> <p><i><b>Note:</b> A copy of the ‘Development Plan’ must be submitted to LRP with this form. A development plan is not required for staff that does not require certification (Specifically focused staff).</i></p>			
<p><b>Please briefly describe the training the individual has received, or will be receiving, in order to provide the service. Also provide a brief description of the supervisory process.</b></p> <p><i>Note: A copy of the individual’s resume must be submitted with this form.</i></p>			

**Please list the project(s) in which that the staff will be providing services:**

**List the group names in which the staff will be providing services, as listed on the 'Approved Group Name and Related SUDPDS Categories' guidance document for your agency:**

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Employee's Signature

Date

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Director's Signature

Date

**Note:** *This form, with all relevant attachments, is due to Lakeshore Regional Entity within 14 days of hire date.*