

# SABEL STEEL SERVICES, INC.

## NEW EMPLOYEE INFORMATION

EMPLOYEE # \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ DEPARTMENT: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE \_\_\_\_\_ Zip: \_\_\_\_\_ COMPANY: 01

SOCIAL SECURITY #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ RESIDENT STATE: \_\_\_\_\_ PAY RATE: \_\_\_\_\_

(CIRCLE ONE)  
PAY PERIODS: 12 OR 52

(CIRCLE ONE)  
SALARY/HOURLY: S OR H

(CIRCLE ONE) (CIRCLE ONE)  
PAID: W OR M SHIFT: 1 2 3 AAC: \_\_\_\_\_ JOB CODE: \_\_\_\_\_

BIRTH DATE: \_\_\_\_\_ HIRE DATE: \_\_\_\_\_

FEDERAL STATUS: \_\_\_\_\_ DEPENDENTS: \_\_\_\_\_ ADDITIONAL: \_\_\_\_\_

STATE STATUS: \_\_\_\_\_ DEPENDENTS: \_\_\_\_\_ ADDITIONAL: \_\_\_\_\_

LA. (ONLY) STATE DEPENDENCY CREDITS: \_\_\_\_\_

HOME TELEPHONE NUMBER: (\_\_\_\_) - \_\_\_\_\_ - \_\_\_\_\_ (Please include area code)

CELL PHONE NUMBER : (\_\_\_\_) - \_\_\_\_\_ - \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

### AFFIRMATIVE ACTION CODES (AAC)

CODE	RACE	CODE	RACE
1	WHITE MALE	6	HISPANIC FEMALE
2	WHITE FEMALE	7	ASIAN / ORIENTAL MALE
3	BLACK MALE	8	ASIA / ORIENTAL FEMALE
4	BLACK FEMALE	9	AMERICAN INDIAN MALE
5	HISPANIC MALE	10	AMERICAN INDIAN FEMALE

### JOB CODES

CODE	TITLE	CODE	TITLE
01	EXECUTIVE OFFICER	16	FORKLIFT OPERATOR
02	DEPT MANAGER	17	TORCH BURNER
03	OUTSIDE SALESPERSON	18	MECHANIC HELPER
04	INSIDE SALESPERSON	19	MECHANIC
05	SUPERINTENDENT	20	OVERHEAD CRANE OPERATOR
06	FOREMAN	21	CRANE OPERATOR
07	SAFETY DIRECTOR	22	MACHINE OPERATOR
08	ADMINISTRATIVE STAFF	23	LABORER
09	BUYER	24	PROBATIONARY
10	ESTIMATOR	25	TEMPORARY
11	DRAFTSPERSON	26	ASST FOREMAN
12	LEAD MAN	27	ASST MANAGER
13	METAL SORTER	28	MGT – TRAINEE
14	DRIVER	30	DIV MANAGER