



SD Hiring Checklist

(Direct Employment Model)

Employer (Individual): _____

Supports Coordinator (SC)/Case Manager (CSM) Name: _____

Phone: _____

Financial Management Service (FMS) Name: _____

Phone: _____

Task	Person Responsible	Date Completed
Choose an FMS	Employer with assistance from _____	
Send Referral to FMS	Supports Coordinator/ Case Manager	
Budget developed	Employer with assistance from _____	
Develop job description	Employer with assistance from _____	
Develop interview questions	Employer with assistance from _____	
Advertise for new employees	Employer with assistance from _____	
Connect with FMS for: <ul style="list-style-type: none"> • Generic job applications • Releases for background checks • Releases for driving history, if desired 	Employer and FMS _____	
Decide where the employee forms will be held (Not at CMHSP)	Employer and FMS	
Decide who will help conduct the interview, if needed	Employer with assistance from _____	
Schedule and complete interview with potential employees	Employer with assistance from _____	



Task	Person Responsible	Date Completed
Potential employees complete and sign: <ul style="list-style-type: none"> • Application • Consent for background check • Consent for driving history, if desired 	Employer with assistance from _____	
Background and Driving checks completed	FMS	
Task	Person Responsible	
Review Background & Driving Checks	FMS & Employer with assistance from _____	
Choose who to hire and offer them job	Employer with assistance from _____	
Employee agreement signed by employer and employee	Employer with assistance from _____	
Select Start Date and Notify Employee	Employer with assistance from _____	
Develop Schedule & back-up plan in case employee is not able to work	Employer with assistance from _____	
Determine training curriculum and where documentation will be kept <ul style="list-style-type: none"> • Medicaid Required • Optional trainings requested by employer 	Employer with assistance from _____	
Employee completes required training and documentation	_____ will assure trainings are completed and signed. Training documents will be kept _____	
Training on the iPOS	_____ will teach employer and/or designee how to train others about the iPOS	
Document training on iPOS	Employer or designee	
Timesheets will be turned in:	Employer and employee How often _____ To Whom _____	

