HR Information Form

Employee Info

FIRST NAME	MIDDLE NAME	LAST NAME
Andrew	Joseph	Skokan

PHONE NUMBER	EMAIL ADDRESS	JOB TITLE
2092489901	andrew2skokan@gmail.com	Security Officer

Address

1480 Lambert Way #1

CITY	STATE	ZIP
Turlock	CA	95380

Licensing

BSIS GUARD CARD #	GUARD CARD EXPIRY	FIREARMS PERMIT
		No

DRIVER'S LICENSE #	DL EXPIRY

Employment

HIRE TYPE	EMPLOYMENT STATUS	DATE OF HIRE
New Hire	On-Call / At-Will	09/15/2026

PAY RATE	PAY FREQUENCY	JOB SITE
18.00	Weekly	Events

Work Schedule

		START	END
☐	MON		
☐	TUE	START	END
☐	WED	START	END
☐	THU	START	END
☐	FRI	START	

END

☐ SAT START END

☐ SUN START END

HR Representative

EMPLOYER / HR REPRESENTATIVE NAME

Rachel Resurreccion

Company Details

COMPANY NAME EIN STATE TAX ID (ENTITY ID)