

Employee picture

Carlson Building Maintenance

NewHire Form 10-09-2025

New Hire Form

New hire/Re-hire	newhire
First name	Fernanda
Middle name	
Last name	Cortez
Second last name	
Address	2939 S Ninth Pl. #NA Milwaukee WI 53215
Phone number	4144912876
Phone alternative	
Email	
Social Security number	309762581
Date of birth	05-01-2006
Gender	Female
First day worked	10-03-2025
Title position	Floater 4
Store name and number	Home
District Manager	Bob Kay
Rate of pay	15.0
Number of hours worked	Less than 30
Number of working days	5
Preferred language	Spanish
Comments/Notes	
Document title	Permanent Resident Card
Document number	SRC7582645696
A# if applicable	020218264
Document expiration	10-15-2034

idBadge