



Carlson Building Maintenance

New Hire Form

10-09-2025

New Hire Form

New hire/Re-hire	newhire
First name	Josefa
Middle name	
Last name	Zabaleta
Second last name	Morales

Address	2939 S Ninth Pl. #NA Milwaukee WI 53215
Phone number	4148524952
Phone alternative	
Email	
Social Security number	333042952
Date of birth	03-19-2000
Gender	Female

First day worked	10-03-2025
Title position	Floater 3
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	SRC0925525493
A# if applicable	056231967
Document expiration	02-01-2034
Employee picture	idBadge