

Employee picture

Carlson Building Maintenance

NewHire Form 03-10-2025

New Hire Form

New hire/Re-hire	newhire
First name	Paola
Middle name	
Last name	Cardenas
Second last name	
A 11	1.604 W.T. 1 4 (1) 1 1 W.T. 50015
Address	1624 W Lincoln Ave #NA Milwaukee WI 53215
Phone number	8134636136
Phone alternative	
Email	
Social Security number	627149752
Date of birth	06-12-1998
Gender	Female
First day worked	03-11-2025
Title position	Floor Tech 2
Store name and number	Home
District Manager	Bob Kay
Rate of pay	15.0
Number of hours worked	More than 30
Number of working days	7
Preferred language	Spanish
Comments/Notes	T1311 New Berlin Couldnt find on the drop down
	box
Document title	Permanent Resident Card
Document number	MSC1990847206
A# if applicable	270632510
Document expiration	10-08-2029

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