

Process Post-Hire Verification Step

Overview

After onboarding is initiated for applicable hires, HR Shared Services can process the Post-Hire Verification Step. During this process, documents and forms applicable to the employee are identified (e.g. benefits forms), based on the nature of the hire.

- **Externals:** SuccessFactors determines which forms are required based on business rules (site, FTE, etc.).
- **Internals:** HR Shared Services selects the required forms based on the employee’s current benefits.

HR Shared Services must complete the employer portion of benefit forms for both internals and externals, and sign the forms as a corporate representative. Some fields on benefit forms are populated by the system (candidate info, employer info, etc.).

Note: You must create a password for your electronic signature before you process the Post-Hire Verification Step. See how to [Change Corporate Representative Electronic Signature Password](#) for step-by-step instructions.

Procedure

1. Click the **Home** menu and select **Onboarding** from the dropdown.



The *Onboarding Dashboard* screen appears and lists the names of all employees who are currently in an Onboarding step (Post Hire Verification, New Employee Step, Signature Step, or Notifications).

2. Click the **name of the employee** for whom you wish to process the Post-Hire Verification Step.

New Hire Activities

94 Total Tasks | My Tasks (1) | Waiting on O... (93) | Overdue (93) | Completed

Switch to Old Work C

Processes	Count	Tasks (1)	Assigned To	Start Date	Creation Date	Employee Id
Onboarding	94					
PostHire Verification Step	11	Carrie Solmundson PostHire Verification Step	Me	May 21, 2024	May 7, 2024	00034567
New Employee Step	41					
Signature Step	42					
Notifications	184					



The *Welcome to the Post Hire Verification Step* screen appears.

- Review the information in the **Employee Information**, **Employment Information**, and **Internal Hire** sections and click **Next**.

Note: Information in each section is pre-populated based on the SAP Candidate Action. If the employee’s start date has changed, the information must be updated in SAP prior to processing the Post-Hire Verification Step.

A Service Desk ticket must be submitted to unlock any greyed-out fields that require manual correction (e.g. Social Insurance Number, Date of Birth, and Gender).

Welcome to the Post Hire Verification Step
PostHire Verification Step

Legal First Name

Legal Last Name

Employee ID

Social Insurance Number

Date of Birth (mm/dd/yyyy)

mm/dd/yyyy

Gender

▼

Email

Start date (mm/dd/yyyy)

mm/dd/yyyy

Employment Information

Job Title

Health Care Aide

Personnel Area

Shared Health (▼

Personnel Sub Area

MNU-WCHREO ▼

Employee Group

Permanent (Per ▼

Employee Sub Group

Part Time (Part ▼

FTE

0.50

Internal Hire

Is this employee an Internal Hire?

Yes
 No

Show Onboarding 1.0 version information

Cancel

Next



Note: If the employee is internal, the *Internal Hire Panel & Form selection* screen will appear. The required forms must be selected based on the employee’s employment action and current benefits enrolment. This screen will not appear for external hires.

Refer to the [HRSS SharePoint](#) to determine which forms to select.

Internal Hire Panel & Form selection (Carrie Solmundson)
PostHire Verification Step

New Hire Information

New Hire Information Yes No*

Employment Equity Survey Yes No*

Emergency Contact Information Yes No*

Conditions of Employment

Confidentiality Policy and Pledge - SH Yes No*

Conflict of Interest Declaration Yes No*

Payroll Information

Direct Deposit Information Yes No*

TD1 Federal and Provincial Tax Forms Yes No*

Benefits

Bluecross HSC Dental Enrolment Yes No*

Hiring Manager Wizard - eHealth

eHealth Yes No*

Show Onboarding 1 Question information
Cancel
Back
Finish

Note: The following selection will appear for an internal hire in the Shared Health Personnel Area with a work location of Thompson:

GWL Dental (Shared Health Thompson Only)	<input type="radio"/> Yes <input type="radio"/> No
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Note: The following selection will appear for an internal hire in the Health Sciences Centre Personnel Area and Personnel Sub Area MNU-SHEO

Bluecross HSC Dental Enrolment	<input type="radio"/> Yes <input type="radio"/> No *
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Note: If the employee requires HSC Dental Plan enrolment, the *Manitoba Blue Cross – HSC Dental Plan* panel will appear.

- The acknowledgement radio button is pre-selected.
- The *Effective Date of Coverage* field must be completed based on enrolment rules.

Manitoba Blue Cross - HSC Dental Plan (Jim Beam)
PostHire Verification Step

HSC Dental Enrollment Rules

- Permanent – First day of the month following 3 months from the employee's hire date.
- Temporary – First day of the month following 1 year from the employee's hire date
- Exception – First day of the month following employee's hire date, only if employee is transferring from another facility in Winnipeg Health Region, where he/she was participating in HEB Dental.

I acknowledge that the HSC Dental plan form requires an employer signature

Manitoba Blue Cross HSC Dental Effective Date of Coverage

Effective Date of Coverage (mm/dd/yyyy) 27/10/2018

The *Review and Approve - PostHire Verification Step* screen appears.

4. Review the information and click **Finish**.

Note: There are hyperlinks within some text that, if clicked, return you to the applicable screen to make edits.

Review and Approve - PostHire Verification Step Finish

Please review the data you have entered. If any information is incorrect simply click on the incorrect data. A wizard screen will pop-up where you can correct the data. Once corrected, click 'Finish' on the pop-up to return to the Review and Approval page.

Welcome to the Post Hire Verification Step

Legal First Name	Carrie	Legal Last Name	Solmundson
Employee ID	00105678	Social Insurance Number	000000000
Date of Birth (mm/dd/yyyy)	06/05/2000	Gender	Female
Email	csolmundson@gmail.com	Start date (mm/dd/yyyy)	14/05/2024
Job Title	Health care Aide	Personnel Area	Shared Health
Personnel Sub Area	MNU-WCHREO	Employee Group	Permanent
Employee Sub Group	Part Time	FTE	0.50

Is this employee an Internal Hire? No

Close
Finish

The *HRSS Req Approval* screen appears(Only if Bluecross HSC Dental Form is applicable to the candidate

5. Review the paragraph under the **Agreement to Use Electronic Click Signature to Sign Documents** heading.
6. Click the **checkbox** beside the agreement statement to select it.
7. Enter your **password for electronic signature** in the **Password** field.
 - If you forgot your password, click the *Forgot Password* link below the *Password* field and follow the prompts.
8. Click **Submit**.

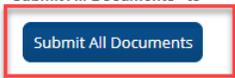
The *Click to Sign* screen appears(if there is HSC Dental Form is applicable to the employee).

- The list of forms that apply to the employee display on the left side of the screen.
 - The first form in the list automatically displays on the screen. In the example below, the first form is the Bluecross HSC Dental Form.
 - Form requires your electronic signature.
 - If you see any errors for information that you input on a form, click the **Correct Data** link at the top of the screen to return to the applicable screen and make corrections.
9. Click the **Click to Sign** button to sign the form.

After you have signed form, a message displays at the top of the screen indicating you have signed all documents.

10. Click Submit All Documents.

All your forms have been signed. Documents are ready to be printed and submitted. Select "Print" to print your documents. Then click "Submit All Documents" to complete the process.



Print Package

1 of 2

PO BOX 1046 STN MAIN WINNIPEG MB R3C 2K7
TEL 204.775.0151 Fax 204.772.1231

Health Sciences Centre
Winnipeg

APPLICATION FOR DENTAL BENEFITS

THIS SECTION TO BE COMPLETED BY EMPLOYEE

LAST NAME Solmundson		FIRST NAME Carrie		EMPLOYEE DATE OF BIRTH	DD MM YYYY 06/05/2000
MAILING ADDRESS - STREET/BOX NUMBER			CITY OR TOWN	PROVINCE	POSTAL CODE
PHONE NUMBER HOME WORK			GENDER <input type="checkbox"/> MALE <input checked="" type="checkbox"/> FEMALE	EMPLOYEE NUMBER 00105678	

PLEASE COMPLETE THIS SECTION IF YOU HAVE ELIGIBLE DEPENDENTS

<input type="checkbox"/> SPOUSE	LAST NAME (if different than employee's)	FIRST NAME	DATE OF BIRTH DD MM YYYY	GENDER <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
<input type="checkbox"/> COMMON LAW				

IF APPLICANT AND SPOUSE ARE NOT LEGALLY MARRIED PLEASE PROVIDE COMMENCEMENT DATE OF COHABITATION (DD/MM/YYYY):

UNMARRIED DEPENDENT CHILDREN:

LAST NAME (if different than employee's)	FIRST NAME	RELATIONSHIP	DATE OF BIRTH			GENDER <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
			DD	MM	YYYY	
						<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
						<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
						<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
						<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE

You return to the *Onboarding Dashboard*, and the employee is now moved into the New Employee Step.

+ Create New Task		Refresh List	Export	10 per page		
Tasks (44)		Assigned To	Start Date	Creation Date	Employee I	
<input type="checkbox"/>	Carrie Solmundson New Employee Step	New Employee Step	May 14, 2024	May 6, 2024	00105678	

Next Steps

Email notifications are generated and sent to the employee to advise that the New Employee Step needs to be completed, and to provide information about registering for a SOGICA Vault account. Employment forms that a successful candidate completes as part of the New Employee Step are stored and accessed in the [SuccessFactors Onboarding Document Center](#).