

Company Name: _____

		PLEASE WRITE LEGIBLE
Name:	MI: Last Name:	
SS#:		
Address:		
City, State, Zip:		
DOB (MM/DD/YYYY):/_		
· · · · · · · · · · · · · · · · · · ·		
Job Classification:		
Department:		
•		
Hourly Rate: \$	Salary Rate: \$	
Hired Date (MM/DD/YYYY):		
Marital Status: Married:	Single:	
Allowances: 0: 1:	2: 4:	5:
Other:		
Additional Withholding: \$		
Signaturo		DATE:
Signature:		DATE:
Employee Email Address:		

Please use this form for new hires and to update current employees.