New Employee Information Sheet

Employer_____ Date_____

Employee Name _____

Address_____

_____

Social Security Number_____

Date of Birth _____

Employee E-Mail (Direct Deposit Only)_____

Date of Hire_____ Job Title/Expected Duties: _____

Hourly Rate_____ Salary_____

For the information below, please either forward copies of the employee's W-4 forms or complete the lines below. If you complete the lines below, you understand that you MUST retain a copy of the employee's W-4 forms in your files.

Federal Withholding:
Marital Status: (Circle One) Single/Married Separate Married Joint Head of Household
Amount of Credits (Line 3)_____ Other Income (Line 4a) _____
Deductions (Line 4b) _____ Extra Federal withholding (Line 4c) _____

State Withholding:
State Withholding Code_____ Additional State withholding _____

Comments/Notes:_____
_____

Authorized by:_____