

# EMPLOYEE INFORMATION FORM

Please fill out all required fields below. You must also complete these additional forms: I-9, Federal W-4 and State W-4.

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## BASIC INFORMATION

First Name \*  MI  Last Name \*

Address 1 \*  City \*

Address 2  State \*  Zip \*

Email Address

Date of Hire \*  /  /  Date of Birth \*  /  /

Social Security Number \*  -  -

## DEDUCTIONS

Deduction Name	Amount Per Pay Period
<input type="text"/>	\$ <input type="text"/> . <input type="text"/>
<input type="text"/>	\$ <input type="text"/> . <input type="text"/>

## DIRECT DEPOSIT INFORMATION

Bank Routing Number \*

Bank Account Number \*

Account Type (check one) \*  
 Checking  Savings

Direct Deposit Distribution (check one) \*  
 Full Amount  Partial \$  .   
 Partial %  .

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EMPLOYER USE ONLY: Employee Rate of Pay \$ \_\_\_\_\_

