



## **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.

BASIC	INF	ORM	ATI	ON
_,		-1 4111		

First Name *	1	MI Last	Name *	
Address 1 *			City *	
Address 2			State * Zip *	
Email Address				
Date of Hire *  / / /  Social Security Number *	Date of Birth *		DEDUCTIONS Deduction Name	Amout Per Pay Period  \$
DIRECT DEPOSIT INFORMATION	N		Bank Routing Number	
Bank Account Number *			Bank Account Number	
Account Type (check one) *  Checking Savings  Direct Deposit Distribution (check one)  Full Amount Partial \$  Partial %	* \$		Account Type (check one)  Checking Savings  Direct Deposit Distribution (check one)  Full Amount Partial \$  Partial %	e) \$

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

