

New Employee Worksheet

PLEASE DO NOT FORWARD FORMS W-4, I-9, STATE NEW HIRE, ETC.

(the information on this form will override these documents)

FROM: (COMPANY CONTACT INFORMATION)

Company: _____ Phone: (____) _____

Contact Name: _____ Email: _____

(Employee Information)

First Name: _____ Middle Initial: ____ Last: _____

Street & #: _____ City: _____ State: ____ Zip Code: _____

Phone: (____) _____ Email: _____

Cell: (____) _____ Social Security #: _____ Pay Rate: _____

Division: _____ Department: _____

Birth Date: ____/____/____ Hire Date: ____/____/____ Gender: _____

(Tax Filing)

<p>Federal: Status: Married <input type="checkbox"/> Single <input type="checkbox"/> Head of Household <input type="checkbox"/> From IRS form; Step 2 Option (c): <input type="checkbox"/> Line 3: _____ Line 4a: _____ Line 4b: _____ Line 4c: _____</p>	<p>State: Status: Married <input type="checkbox"/> Single <input type="checkbox"/> Exemptions: _____ Additional: _____</p>	<p>City (if required): Status: Married <input type="checkbox"/> Single <input type="checkbox"/> Exemptions: _____ Additional: _____</p>
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(Wages this pay period)

(Deductions this pay period)

Type	Hours / Salary This Pay
Regular Pay	

Type	Amount	Every Pay ?

Notes & special instructions: _____

Important: To protect your privacy, please forward this document to us by fax or secure file transfer available under the Login link at www.Payrite.com

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