

EMPLOYEE PAYROLL WORKSHEET

Newspaper: _____

Circle One: NEW EMPLOYEE CHANGE TERMINATE

Employee Name: _____

Address: _____

Date of Birth: ___/___/___ Social Security # ___ - ___ - ___

Date of Hire: ___/___/___ Date of First Check: ___/___/___

Marital Status: _____ Gender: _____ Race: _____

Pay Rate - Hourly Rate: _____ Salary: Yearly Amount _____

Department: _____ Job Description: _____

Employment Status (Circle One): FULL TIME PART TIME TEMPORARY

Tax Information:

Number of Federal Exemptions: _____ Withhold Extra Federal Amount: _____

Number of State Exemptions: _____ Withhold Extra State Amount: _____

Direct Deposit Information:

Account Type (circle one)

Acct #: _____ Routing #: _____ Checking Savings

Acct #: _____ Routing #: _____ Checking Savings

Acct #: _____ Routing #: _____ Checking Savings

Date of Termination: ___/___/___ Date of Final Check: ___/___/___

***** NEW EMPLOYEE CHECKLIST *****

___ Employee PR Worksheet – Complete / Fax or Scan to Ft. Payne / File with employee records

___ W-4 – Complete / Fax or Scan to Ft. Payne / File with employee's records

___ I-9 - Complete / Fax or Scan to Ft. Payne / File with employee's records

___ Direct Deposit Information - Complete / Fax or Scan to Ft. Payne / File with employee's records

___ Copy of VOID Check - Fax or Scan to Ft. Payne / File with employee records

___ Give Employee Insurance information to full time employees
