

# EMPLOYEE INFORMATION

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Employee Name: \_\_\_\_\_ SS#: \_\_\_\_\_

Address: \_\_\_\_\_ DOB: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

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Job Title: \_\_\_\_\_ Sex:  Male  Female

Hire Date: \_\_\_\_\_  Full Time  Part Time  Hourly  Salaried

Rate of Pay: \$ \_\_\_\_\_  Weekly  Bi-Weekly  Semi-Monthly  Monthly

Additional Deductions: \_\_\_\_\_ Amount: \_\_\_\_\_

Withholdings: **FED**  Single  Married Exemptions: \_\_\_\_\_ **NC**  Single  Married Exemptions: \_\_\_\_\_

Retirement: Amount/Percentage: \_\_\_\_\_  Direct Deposit  Check  
(Enclose a Voided Check)

Employee's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Attach Voided Check Here:

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Manager Initials: \_\_\_\_\_ Date: \_\_\_\_\_

DELIVER TO THE PAYROLL DEPARTMENT  I-9  W-4  NC-4