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EMPLOYEE INFORMATION

EMPLOYEE ID	START DATE	DEPARTMENT	JOB TITLE	REPORTS TO

PERSONAL

Legal name (first, middle, last) _____

Preferred name _____

Date of birth _____

Home address _____

City, state, ZIP _____

Mobile phone _____

Personal email _____

EMPLOYMENT

Employment type _____

Full-time / part-time _____

Exempt / non-exempt _____

Pay basis (hourly / salary) _____

Work location _____

Work phone / ext. _____

Work email _____

Emergency contacts

Name	Relationship	Primary phone	Alternate phone	Email

NEW-HIRE PAPERWORK COMPLETED

- ☐ Form W-4 (federal withholding)
- ☐ State withholding form
- ☐ Handbook acknowledgement
- ☐ Confidentiality / IP agreement
- ☐ Form I-9 and ID verified
- ☐ Direct deposit authorization
- ☐ Benefits enrollment
- ☐ Emergency contact card

Direct deposit: bank name (details on separate form) _____

Uniform / equipment issued _____

I confirm the information above is accurate and I will notify HR of any change. Social Security and bank account numbers are collected on the separate W-4, I-9 and direct deposit forms, not on this sheet.

_____ Employee signature / date

_____ HR received by / date