

New Hire Form

Company Name:		Client #:		
Employee's Name: First		Middle Initial	Last	
Employee's Social Sec	curity Number:			
Employee's Mailing A	ddress:			
City/State/Zip	p:			
Employee's Email Ado	dress:			
Birth Date:	Hire Date:			
Department:		PTO/Vacation Eligible?	Yes	No
Pay Type: (Mark ONLY one)	Hourly \$	_/per hour	Salary \$	/per pay period

Choose one:

<u>1099 Contractor:</u> (NO TAX WITHHOLDING) – be sure to fill out W-9 <u>Employee:</u> you must fill out info from W-4 below <u>and</u> attach copy of W4

• <u>Step 1(c)</u>: Single or Married filing separately Married filing jointly (or qualifying widower) Head of Household

Complete Steps 2-4 **<u>ONLY</u>** if they apply, enter dollar amounts below:

- **<u>Step 2</u>**: (check here if 2c box is checked)
- <u>Step 3</u>: \$_____ (claim dependents)
- <u>Step 4(a)</u>: \$_____ (other income)
- <u>Step 4(b)</u>: \$_____ (deductions)
- <u>Step 4(c)</u>: \$_____ (extra withholding)
- Check here if <u>"EXEMPT"</u> is written below 4(c) see instructions

Special Notes: