

NEW EMPLOYEE INFORMATION FORM

(to be submitted with employee paperwork)

TODAY'S DATE

COMPANY LEGAL NAME

DBA NAME

Employee Name (First & Last)

Date of Birth

Start Date (first day worked)

First Pay Date

Hourly Rate (if not applicable, leave blank) – if multiple, add all (label Rate 1, Rate 2, etc...)

Annual Salary (if not applicable, leave blank)

Please check all that apply

- ☐ Employee receives tips in cash or check between paydays
- ☐ Employee receives tips paid on the paycheck
- ☐ Employee will receive commission or bonus payments
- ☐ Employee receives PTO or vacation time
- ☐ Employee has a garnishment *(if yes, please include related order)*
- ☐ Employee has been offered health and/or retirement benefits
(please include all paperwork with deduction information)

Please add any other important info regarding employment or employee pay

Employee set up is not complete unless this form is submitted with I9 and W4 paperwork