

Employee Setup Worksheet



711 Coliseum Plaza Ct
Winston-Salem, NC 27106
(336) 773-0128 phone
(336) 773-1055 fax

Company Name: _____

Customer Service Representative: _____

Company ID: _____

New Employee

Change to Existing Employee

Basic Information

Legal Last Name _____

Legal First Name _____ Middle Name _____

Address _____

City _____ State _____ Zip _____

Gender **F** **M** Birth Date _____ Soc Sec Nbr _____

Emergency Contact (optional)

Name _____ Phone _____ Phone _____

Name _____ Phone _____ Phone _____

Department and Status Information

Hire Date _____ Workers Comp Code _____ (optional)

Department _____ (optional) PTO Balance _____ (optional)

Pay Rate Information

Base Rate _____ per hour Average Hours _____ (optional)

Salary Amount _____ per payroll Addl Rate 2 _____ per hour (optional)

Tax Information

Employee Tax Form **W2** **1099** (circle one)

Federal Marital Filing Status _____ Number of Exemptions _____ Add Withholding _____ \$ or %

State Marital Filing Status _____ Number of Exemptions _____ Add Withholding _____ \$ or %

Unemployment State _____ (if different from state w/h) Work State _____ (optional)