



A more human resource.™



FOP-SBS-E1002

Employee Information Form

* Denotes required field

First Name *

MI

Last Name *

Address 1 *

Gender *

Male

Female

Address 2

City *

State *

Zip *

Social Security Number *

Date of Birth *

Date of Hire *

Email Address

Pay Rate (check one) *

Hourly

Salary

Amount *

Tax Status (check one) *

W-2

1099

Pay Frequency (check one) *

Weekly

Bi-weekly

Semi-monthly

Monthly

Quarterly

Federal Filing Status (check one) *

Single

Married

Married - at Higher Single Rate

Allowances

Additional Federal Withholdings (check one) *

Additional Amount Withheld

Flat \$ Amount

Additional % Withheld

Flat % Amount

State Filing Status (check one) *

Same as Federal

Single

Married

Married - at Higher Single Rate

Allowances

Additional State Withholdings (check one) *

Additional Amount Withheld

Flat \$ Amount

Additional % Withheld

Flat % Amount

Direct Deposit Information

Bank Routing # *

Bank Routing #

Bank Account # *

Bank Account #

Account Type (check one) *

Checking

Savings

Account Type (check one)

Checking

Savings

Deposit Amount (check one) *

Full Amount

Partial \$

Partial %

Deposit Amount (check one)

Remainder

Partial \$

Partial %

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