

# Employee Setup Worksheet

Company ID: \_\_\_\_\_

Company Name: \_\_\_\_\_

New Employee

Change to Existing Employee

<b>Basic Information</b>
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Last Name	_____		
First Name	_____	Middle Name	_____
Address	_____		
City	_____	State	_____
		Zip	_____
Email	_____		
Gender	<b>F</b>	<b>M</b>	
Birth Date	_____	Soc Sec #	_____

<b>Department and Status Information</b>
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Department	_____	Workers Comp Code <sub>(optional)</sub>	_____
Hire Date	_____		

<b>Pay Rate Information</b>
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Base Rate	_____	per hour		Avg Hours	_____	(optional)
Salary Amount	_____	per payroll	Addl Rate 2	_____	per hour	(optional)
Addl Rate 3	_____	per hour	(optional)	Addl Rate 4	_____	per hour
						(optional)

**Deductions Information**

	Per Paycheck Amounts	Y/N
Health Ins.	\$ _____	Pre-Tax? _____
Dental Ins.	\$ _____	Pre-Tax? _____
401k	\$ _____	Pre-Tax? _____
Garnishment	\$ _____	Pre-Tax? _____
Loans	\$ _____	Pre-Tax? _____
Other	\$ _____	Pre-Tax? _____

**Tax Information**

Employee Tax Form    **W-2**    **1099** (circle one)

Federal Filing Status    \_\_\_\_\_    Exemptions \_\_\_\_\_    Additional Withholding \_\_\_\_\_ \$ or %

State Filing Status    \_\_\_\_\_    Exemptions \_\_\_\_\_    Additional Withholding \_\_\_\_\_ \$ or %

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